

**FEMALE ADOLESCENTS' EXPERIENCES AND PERCEPTIONS OF TEENAGE
PREGNANCY IN BELFAST, MPUMALANGA**

by

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ABSTRACT

As female adolescents go through the transition phase of adolescence, they respond to a variety of factors influencing their sexual development, for instance, cultural practices, socioeconomic status, media exposure, internet access, increased autonomy to explore their sexuality, as well as quality of care, guidance and supervision by primary caregivers. If they do not get enough guidance from caregivers, teachers or medical clinics, adolescents often fall pregnant. The consequences of unexpected pregnancies prove to be negative on intrapersonal as well as interpersonal levels. There is a need to reduce such pregnancies to give adolescents a better chance in life and to enhance optimal development on individual, social, emotional and moral levels. This study explored female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga, in South Africa. The researcher tried to make a positive contribution towards reducing the incidence of teenage pregnancy in South Africa, especially in rural, farm and semi-urban settings, through an inductive study of African female adolescents in selected secondary schools. Data were collected through individual in-depth audio-recorded semi-structured interviews with 20 African adolescent girls who were purposefully selected for the study. The researcher used Tesch's method of analysis to analyse the data collected and to deduce themes and categories. Adolescents mostly fell pregnant, because of changes in sexual interest, emotional experiences, social development dynamics, adolescent thinking patterns and failure to use contraceptives. Teenage pregnancy affected the life-world of adolescents by influencing negatively on their physical health, psycho-emotional wellbeing, moral behaviour, social and school lives. The researcher established that the adolescents, their families, communities and society would continue to face the adverse outcomes of teenage pregnancy if the rates of teenage pregnancy remained unabated. The study therefore recommended collaborative efforts of adults in various governmental and private spheres for prevention of teenage pregnancy and for support of adolescent mothers and their babies during and after early-unexpected pregnancies. Some of the recommendations were: national awareness campaigns to curb teenage pregnancies; the review of the Life Orientation curriculum by the Department of Basic Education; the re-orientation of health delivery services; the positive inputs of teachers and schools; and a re-orientation of the responsibilities of primary caregivers and other adults.

Key terms: Bronfenbrenner's Bio-ecological theory; African female adolescents; experiences; perceptions; teenage pregnancy; adolescent developmental phase; individual development; social development; psycho-emotional development; moral development

DECLARATION

Name: WILTON MUDZOKORA

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Degree: DOCTOR OF EDUCATION (PSYCHOLOGY OF EDUCATION)

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I declare that the above dissertation/thesis is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

SIGNATURE

DATE

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DEDICATION

This study is dedicated to my late father Micheck Mudzokora ‘Dhebha Chitatarida’ for his immense sacrifice to send me to a boarding school despite economic challenges associated with polygamous families, my late mother Russia Muchini ‘Machedu’ for her unwavering motherly love and my beloved wife Esnath Mudzokora for being there for me even in the most trying times.

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CHAPTER ONE

INTRODUCTORY ORIENTATION

1.1 INTRODUCTION

“Pregnancy at any age is a life-altering event. But during the teenage years, pregnancy means that typical experiences and opportunities are missed such as high school, graduation, college and general freedom of choice” (Tulloch, 2014:1). It implies that teenage pregnancy has adverse effects on the adolescent female learners’ life chances, including limiting their chances of completing school, mainly because it is difficult to meet the demands of motherhood as well as that of school. “Teenage pregnancy is an international phenomenon affecting teenagers as young as 12 years of age” (James, Van Rooyen & Strumpher, 2012:190). It has been a problem in South Africa for decades and the rate of teenagers falling pregnant is still an issue of concern. Teenage pregnancies “are usually associated with social issues, such as lower educational levels, higher rates of poverty and other adverse life outcomes” (Tucker 1226, 2012: 1), such as limited career advancement prospects for children of teenage mothers (as well as for the mothers). Kelly (2004:54) asserts that teenage pregnancy in both developed and developing countries happens “usually outside of marriage, and carries a social stigma in many communities and cultures”, which is probably an indication that many societies consider it a serious social problem. Significant research worldwide has examined factors that lead to teenage pregnancy and several “campaigns have attempted to uncover the causes and limit the numbers of teenage pregnancies” (Tucker 1226, 2012:2), but little research has been allocated to the African female adolescents’ experiences and perceptions of teenage pregnancy. In this research attention was given to the contributing factors, causes and consequences of teenage pregnancy amongst African female adolescent learners, the bi-directional influences of adolescent developmental phases and teenage pregnancy and how African female adolescents perceive the experience of teenage pregnancy.

1.2 BACKGROUND

The topic of teenage pregnancy has been the focus of debate and research in a number of countries around the world, but without notable results towards positive change in the situation (Arai, 2009:12). Teenage pregnancy is defined as pregnancy of adolescents aged 13 to 19 (UNICEF, 2008:1; Fulghesu, 2017:240). The teenager who falls pregnant often does not

complete her secondary education, thus has few marketable skills; is financially or economically dependent upon her parents or guardians; and/or continues to live at home; and often demonstrates emotional, psychological and cognitive immaturity (Fulghesu, 2017:240; UNFPA, 2013:6; UNICEF, 2008:1).

An overview of the situation of teenage pregnancy from a worldwide perspective shows that the battle is still on to lessen the phenomenon. Research findings by Cohen (2011:1) revealed that “despite a £280 million investment and a much trumpeted advertising campaign to promote contraception, Britain still has the highest teenage pregnancy rate in Europe”. The United States also has a very high rate of teenage pregnancy in the industrialised world (Meece & Daniels, 2008:13; Cohen, 2011:1). According to research worldwide (e.g. James et al., 2012:192), most teenagers who fall pregnant are reportedly still attending schools and are mostly aged between 12 and 18 years.

The face of teenage pregnancy in South Africa is no reason for celebration either. Deliberating on the situation in South Africa, Dube (2011:1) describes teenage pregnancy as a menace to our society. Dube (2011:1) explains that teenage pregnancy “is a struggle that needs to receive as much attention and focus as the struggle against apartheid and more recently, Acquired Immune Deficiency Syndrome (AIDS)”. Seutlwadi, Peltzer and Mchunu (2012:43) assert that “the high rate of unintended pregnancies in South Africa, particularly among the youth, remains a public health concern”. The concern is partly because South Africa has a high teenage pregnancy problem but unfortunately at this stage more focus is put on prevention of HIV and AIDS than on reducing the prevalence of adolescent childbearing. The high rate of teenage pregnancy in South Africa is also highlighted by Harrison (1999:1) who contends that “South Africa has a huge teenage pregnancy problem; one in three girls has had a baby by the age of twenty”. Research by Mkhwanazi (2010:11) reveals that teenage pregnancy “is more common in Black and coloured communities in South Africa”. Cunningham and Boulton’s (1996:691) research also reveals that “teenage pregnancy and sexually transmitted diseases amongst Black teenagers in South Africa have reached a threatening level”.

The same situation prevails in Belfast, Mpumalanga, in South Africa. The primary and high school teachers in Belfast have expressed concerns at the high rate of African teenage pregnancy. James et al. (2012:190) assert that “in many countries in the world, teenage pregnancy results in the infant ultimately becoming the government’s responsibility as the

teenager will receive a grant to assist with raising the infant". The Belfast community is "among the communities faced with the challenge of increasing" African teenage pregnancies; therefore the pressure on governmental assistance becomes bigger (James et al., 2012:190). The high levels of teenage pregnancy, as well as unplanned pregnancies, among African teenagers in Belfast, also predict a high level of HIV and AIDS transmission, a situation that cannot go unchallenged.

Teenage pregnancy and HIV and AIDS are basically intertwined because they are both often the outcome of inappropriate sexual behaviour. The high rate of African teenage pregnancies in Belfast, in Mpumalanga in South Africa is an indication that the teenagers are susceptible to HIV and AIDS transmission. The high rate of teenage pregnancies as well as unwanted pregnancies also show a lack of use of contraceptives and safe sex practices as alluded to by Brown (2012:6).

There are many contributing factors predisposing African female adolescents to falling pregnant and they include their perception of pregnancy, poverty, African cultural endorsements of pregnancy and lack of or limited knowledge of contraception. That is why Cunningham and Boulton (1996:178) reiterate that Black teenage pregnancy has reached a frightening level in South Africa and therefore warrants more attention to change the situation.

Teenage pregnancy and unplanned pregnancy among African female adolescent learners are at the root of a number of public health problems such as pre- and post-natal health problems and social challenges not only in Belfast, but in South Africa in general and the world at large. Teenage pregnancy or adolescent childbearing is associated with "a host of critical social challenges" (Ehow, 2013:1) such as poverty, public cost, education and crime. Teenage pregnancy may mean school dropout and low educational achievement or failure which leads to an unstable future with limited employment opportunities. It implies that teenage pregnancy has negative educational outcomes. Research carried out by Mpanza and Nzima (2010:431) revealed that less than 1% of teenage mothers complete a college degree, implying that teenage pregnancy can affect the quality of living of both the mother and the child. That is why Bonell (2004:255) reiterates that teenage pregnancy mediates the intergenerational transmission of poverty. Mkhwanazi's (2010:347) research findings revealed that "teenagers who become mothers are not only more likely to be poor but are also likely to perpetuate the cycle of poverty".

Researchers also reveal the financial implications of teenage pregnancy. The National Campaign in the USA to prevent unintended pregnancy explains that as of 2006 an estimated \$9 billion of US tax payers' money was spent on health care services, criminal justice and foster-care programmes as inter alia a result of teenage pregnancy (Ehow Health, 2011:1). Because only a small percentage of teenage mothers marry and stay married to the child's father, as alluded to by Meece and Daniels (2008:118), most women rely on public assistance during and after pregnancy. Teenage mothers in general cannot meet the costs of raising a child and as a result many babies of teenage mothers may end up in foster care or the mothers will rely more on social grants, as is the case in South Africa. Pregnant teenagers often need more health care because they are normally physically not mature enough to carry a baby, thus making them more susceptible to pre- and post-natal health problems, as well as complications when giving birth. Statistics also show that "the children of teenage mothers are 13 percent more likely to end up in prison" (Dube, 2011:1) because they are more likely to become delinquents due to the poor upbringing they receive from inexperienced teenage mothers. As a result many of these children may end up in prison after committing crimes and, indirectly, governments may spend more money on criminal justice due to teenage pregnancy (Collier, 2009:397).

All of the above imply that teenage pregnancy has far-reaching implications on the moral development, physical and emotional wellbeing of the teenagers, government finances, health care and education if left unabated. These assertions also underscore the persistent and complex nature of teenage pregnancy particularly amongst African female adolescents. The teenage pregnancy problem has been in existence in many countries for decades and has not been easy to eradicate. It is complex because it affects many facets of society directly and indirectly such as health care, social welfare, education and human rights abuses. The battle against teenage pregnancy is still far from being won in Belfast, Mpumalanga in South Africa and the world over.

Jewkes, Morrel, Christofides (2009:675) posit that "reducing rates of teenage pregnancy is an important part of the agenda of action for meeting most of the millennium development goals" in South Africa. "The millennium development goals (MDGs) are the world's time-bound and quantified targets for addressing extreme poverty in its many dimensions; income, poverty, hunger, disease, lack of adequate shelter, and exclusion, while promoting gender equality, education, and environmental sustainability" (Millennium Project, 2006:1). "South Africa is one of the 189 countries that signed the historic millennium declaration at the

United Nations Summit” in 2000; hence it has an obligation to address the millennium goals (UNICEF, 2014:1). There is tremendous scope for further progress in reducing teenage pregnancy. The researcher believed that one way was to pay attention to the African female adolescents’ experiences and perceptions of teenage pregnancy.

In this study the researcher explored the African female adolescents’ experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The study looked at the contributing factors and conditions that promote teenage pregnancy, the consequences of teenage pregnancy, how the developmental phases in adolescence have an influence on teenage pregnancy, how teenage pregnancy impacts on the developmental phases of female adolescents and also how the African female adolescents in Belfast, Mpumalanga perceive the experience of teenage pregnancy.

1.3 AWARENESS OF THE PROBLEM

The researcher joined a secondary school in Belfast in January 2009 as a Mathematics and Natural Science educator. What touched the educator most was the number of female adolescent learners who fell pregnant that year. In a school of almost 200 female learners more than ten fell pregnant, including grade 12 learners who were preparing for their final examinations. Two of the grade 12 learners gave birth very close to examination time. What also got the attention of the researcher was that one of the grade 12 learners gave birth to her third child, signifying signs of repeated pregnancy in the school. As the years progressed the teenage pregnancy rate increased and the teaching staff showed no signs of real concern but instead just took it casually. The statistics that were taken by the researcher on 28 April 2013 showed that out of 250 female learners in the school 40 (16 percent) had given birth at least once in their lifetime.

Media coverage of teenage pregnancy in South Africa also prompted the researcher to look into teenage pregnancy as a real social problem that warranted further investigation. For example, *The Sowetan* published an article entitled “Sex before school shock” on 3 February 2011. The article revealed that at Mavalani Secondary School in Giyani, Limpopo, 57 pupils were found to be pregnant in the previous month and the youngest girl was 13 years old.

The growing awareness of teenage pregnancy led the researcher to ponder over numerous questions about this phenomenon in Belfast such as: (a) What makes these learners fall pregnant in such large numbers? (b) What are the motivations for the female learners’

actions? (c) What meanings, constructs and perceptions do they have about pregnancy? The researcher was then prompted to investigate these questions about teenage pregnancy in Belfast, Mpumalanga in South Africa in a bid to lessen the phenomenon.

1.4 PRELIMINARY LITERATURE REVIEW

1.4.1 Adolescent development and teenage pregnancy

The roots, determinants and causes of teenage pregnancy are multifaceted and complex (Dube, 2011:1). There are several factors that come into play when discussing teenage pregnancy and most of them are interwoven such as intrapersonal (individual) and interpersonal (relational) factors. According to Bronfenbrenner's Ecological Systems theory individual factors are individual characteristics or issues that influence behaviour, such as adolescent development, which entail physical, cognitive and emotional changes (Brown, 2012:120). It also includes beliefs, perceptions, meanings and personal convictions about teenage pregnancy (Panday, Makiwane, Ranchod & Letsoalo, 2009:31).

Teenage pregnancy can also affect normal adolescent development. Teenage pregnancy causes, for instance, dramatic changes to an adolescent girl's lifestyle, emotional well-being and physical body. Teenage pregnancy thus has physical, emotional, psychological, moral and social implications for the female adolescent. Maliki (2012:2) posits that morbidity, health and social problems from teenage pregnancy thus need to be emphasised.

1.4.1.1 Physical development and teenage pregnancy

Physical changes in the adolescent period influence teenage pregnancy if the young adolescent is not properly guided and informed to adapt to these changes. Elliot, Kratochwill, Littlefield Cook and Travers (2000:54) contend that "these physical changes include dramatic shifts in the shape of the body, increases in hormones, and changes in brain architecture. These biological shifts are directly linked to changes in sexual interest, cognitive capacities and physical capacities". Slavin (1991:80) aptly points out that one of the most important challenges for adolescents is to adapt to the changes in their bodies such as those changes associated with puberty. Physical changes in adolescence can influence adolescents' perceptions of teenage pregnancy if they are not properly guided to adapt to those changes. Research has consistently shown that most teenage pregnancies are unintended and unwanted (Meece & Daniels, 2008:117), which implies that most teenage pregnancies could be as a

result of failure to adapt to these physical changes and challenges. The adolescent girls should be made aware that these changes are natural occurrences that influence any person but through proper guidance they can live with them and embrace them in a healthy way. While it is normal for adolescents to think about sexual practices, Jewkes et al. (2009:3) quickly caution that “adolescents are too immature, both physically and psychologically to engage in sexual intercourse or to become parents”.

Teenage pregnancy can affect the physical development of adolescents. An adolescent who experiences teenage pregnancy will have to endure nine months of rapid bodily changes, much more intense than what normally happens during puberty. Roles (1990:34) asserts that “during adolescence you are already in a time of physical and emotional change. If you decide to carry the baby to term you will find that pregnancy compounds these changes”. Researchers (e.g. Allen & Dowling, 1998:150) revealed that during adolescence teenagers pay particular attention to their body shape and beauty thus the change in the size of the body as the pregnancy develops causes serious concerns for the pregnant teenager. Allen and Dowling’s (1998:150) research revealed that adolescents who fell pregnant “struggled to come to terms with a body which they generally abhorred, and most were desperate to reclaim and to reinscribe their bodies as not pregnant”. Unfortunately, the same research indicated that “a return to pre-pregnant shape was rather elusive for many teenagers” (Allen & Dowling, 1998:150). It implies that the physical changes caused by teenage pregnancy can be a source of worry in a teenage mother.

Teenage pregnancies also have health implications for the pregnant teenager thus impacting the physical development of the teenager. Pregnancy in the very young is generally considered a high risk event because it adds pressure on a body which is still growing. For example, immaturity of the pelvic bones may cause obstructed labour in very young girls (Vincent, 2012: 3). According to the Bulletin of the World Health Organisation (2009:484),

Adolescent mothers face a higher risk of obstructed labour than women in their twenties. Without adequate emergency obstetric care, this can lead to uterine rupture and a high risk of death for both mother and infant. For those who survive, prolonged labour can cause obstetric fistula, which is a tear between the vagina and the bladder or the rectum, causing urine or faeces to leak.

Research also shows that most of the pregnant teenage girls delay prenatal care maybe due to denial or fear, thus the chances of having complications when giving birth are higher. Bryant (2006:133) posits that 50% of pregnant teenage girls do not receive prenatal care and as a

result it leads to more health complications. The major reason behind the delay in pre-natal care is that most pregnancies of adolescents are unwanted therefore can create an emotional crisis resulting in feelings of shame, guilt, fear and denial in the adolescent. In the early part of a typical pregnancy an adolescent may become more regressed and introspective, in acknowledging the idea that there exists a foetus in her body thereby leading to denial and delayed pre-natal care. Complications mentioned in literature among teenagers include premature labour, low birth weight, increased neo-natal mortality, iron deficiency anaemia, toxemia, prolonged labour, feropelvic disproportion, vaginal infection and vaginal lacerations (Vincent, 2012:3; Allen & Dowling, 1998:20), all of which affect normal physical development. Research shows that physiologically the adjustments of pregnancy are superimposed on those of pubescence. Physiologically and intellectually the pregnant adolescent is still developing. It is therefore difficult for the adolescent to meet the physiological demands of pregnancy; hence complications are experienced (Bryant, 2006:133).

1.4.1.2 Cognitive development and teenage pregnancy

Cognitive changes in a teenage girl can influence adolescents' perceptions of teenage pregnancy. Qualitative shifts in cognitive ability occur over time and these developments of an adolescent's cognitive abilities have implications for a number of aspects of development, including the way in which an adolescent girl is likely to think about the experiences of teenage pregnancy and the manner in which she responds to her experiences (Biehal, 1995:58). In Piaget's theory of cognitive development, adolescents begin to be aware of the limitations of their thinking and they wrestle with concepts that are removed from their experiences (Woolfolk, 2010:38-39). In the context of teenage pregnancy, an adolescent girl can begin to experiment with inappropriate sexual behaviour that can lead to pregnancy. A teenage girl can also have misconceptions about contraception possibly because of her level of cognitive development and cultural influences (Weiss & Correia, 2012:5; Duncan 2007:307). Contraceptive knowledge has not totally prevented the problems of teenage pregnancy, in part because the adolescents who become pregnant are not sufficiently developed intellectually to perceive that today's actions have a bearing on future consequences (Seutlwadi et al., 2012:44). Gardner's multiple intelligence theory explains that different people handle knowledge and information in different ways (Maftoon, 2012: 1233), thus an adolescent girl may be required to make decisions based on information about sexuality and the risks of teenage pregnancy which she is not prepared for. Briggs (2002:123)

explains that adolescents have more responsibility for decision making in confusing and uncertain contexts and are confronted with a multitude of risks such as underage sexuality, drug abuse and alcoholism that can promote unsafe sexual relationships that can result in teenage pregnancy. Good, informed decision making is paramount for a teenage girl who faces the risks of teenage pregnancy.

The dramatic changes in the pregnant adolescent's physical body, abnormal psychological and social development, because of an unwanted pregnancy, negatively affect cognitive development in the teenager. According to Piaget, the following four factors contribute to children's cognitive development: maturation of inherited physical structures, physical experiences with the environment, social transmission of information and knowledge, and equilibration (Meece & Daniels, 2008:129). By implication, teenage pregnancy, with its negative impact on physical development, retards maturation of inherited physical structures; thus it affects normal cognitive development. Teenage pregnancy advances social exclusion of the pregnant teenager by promoting isolation and stigmatisation of the teenager (Chigona & Chetty, 2008:144); thus social transmission of information and knowledge which is paramount for cognitive development is disturbed. According to Vygotsky's social cultural theory, social interactions with more knowledgeable peers, and adults like teachers and parents provide the main vehicles for intellectual development (McDevitt & Ormrod, 2010:196). Vygotsky emphasises the influence of social and cultural factors in children's cognitive development by asserting that through informal interactions and formal schooling adults convey to children the ways in which their culture interprets the world (Slavin, 2009:42). Meece and Daniels (2008:161), also emphasising the role of social interactions in children's cognitive development, posit that no real intellectual activity can be carried out in the form of experimental actions and spontaneous investigations without free collaboration among individuals. The onset of teenage pregnancy does not promote free collaboration of the teenager with other students, teachers and significant adults because of its associated stigma, isolation and ultimately social exclusion. As a result, teenage pregnancy can *inter alia* affect the normal cognitive development of the adolescent female learner.

1.4.1.3 Emotional and psychological development and teenage pregnancy

Emotional changes in the adolescent girl can also impinge on teenage pregnancy. Emotions, often called feelings, include experiences such as love, hate, anger, trust, joy, panic, fear and

grief (Frijda, 1996:290). The teenage years are a time of physiological and psychological turmoil due to a myriad of changes in adolescents' experiences (Sigelman & Rider, 2012:39).

Psychoanalytic theories focus on the interaction between certain internal conflicts and the environment (McDevitt & Ormrod, 2010:196). In other words, their main thrust is on the developmental changes in the self and personality. The psychoanalytic theorists such as Sigmund Freud (1856-1939) and Erik Erikson (1902-1994) saw development as a discontinuous process that follows a series of discrete stages (Woolfolk, 2010:16-17). At each stage of maturation, certain drives, needs or conflicts emerge that influence the way a child relates to the environment (Meece & Daniels, 2008:129). By implication, in this study the drives, needs or conflicts that emerge in the adolescent female learners can influence their perceptions of teenage pregnancy. The psychoanalytic theorists also believe that early experiences play a crucial role in later characteristics and behaviour of an individual (McDevitt & Ormrod, 2010:194), so they can influence *inter alia* the sexual behaviours of adolescents.

Psychological or emotional changes in the adolescents can also influence their perceptions of teenage pregnancy. In view of the behaviourists' principle of association, teenage girls may learn to associate the very presence of a partner with the pleasurable sensations associated with sexual activity (Sigelman & Rider, 2012:40), thus the chances of repeated sexual activities become more pronounced thereby leading to unwanted pregnancies. The individual perceptions and personal convictions of teenage girls about teenage pregnancy can also be an important factor that can determine sexual behaviour that can lead to teenage pregnancy. For example, if an adolescent girl views teenage pregnancy positively there are more chances of indulging in sexual acts that can result in teenage pregnancy.

Adolescent development has implications for the self-efficacy of an adolescent. Berger (2011:266) explains that "self-efficacy refers to the belief of some people that they are able to change themselves and effectively alter the social context". According to Duncan (2007:307) the adolescent stage promotes a greater feeling of self-efficacy, which in turn could influence sexual behaviour. This happens mainly because an adolescent seeks greater freedom and independence which can lead the adolescent child to experiment with new behaviours such as drug abuse and early sexual activities. In the process the adolescent child may be vulnerable to making poor choices with negative long lasting consequences like teenage pregnancy.

Teenage pregnancy has negative implications for the emotional and psychological well-being of adolescents. Pregnancy, with its alterations in physical characteristics, is a disruptive experience that can trigger intense emotional strain in adolescence. Max (1993:19) posits that “all girls, regardless of pubertal timing, will experience some distress, particularly at the time of most rapid change. When pregnancy comes on top of this, one can imagine the level of distress such an adolescent goes through”. Vincent’s (2012:19) research showed that a positive pregnancy test amongst most pregnant adolescents was inevitably accompanied by a broad array of thoughts and feelings which included feelings of guilt because becoming pregnant at that age ran counter to societal and often family expectations. For example, many families and communities expect teenagers to complete school and secure employment before they can become mothers. Vincent’s (2012:44) research also revealed that people’s reactions to the adolescent girls’ youthful motherhood made their lives more stressful and influenced their thoughts, feelings and behaviours, sometimes in detrimental ways. For example, the swollen belly of a uniform-clad pregnant school girl is a powerful and uncomfortable image, a visual oxymoron to which people are unaccustomed and this can lead to all sorts of reactions from people including negative verbal comments towards the pregnant teenage learner (Vincent, 2012:1).

One of the long lasting effects of teenage pregnancy involves the emotional stress of planning for parenthood (Meece & Daniels, 2008). For example, the teenage girls’ inability to care for the baby financially, emotionally and physically can be a cause of concern for many young girls who fall pregnant. That is why Minnick and Shandler (2011:242) in their research revealed that “mild to moderately severe post-traumatic stress related to labour and delivery were reported for about 33 percent and postpartum depression symptoms were reported in approximately 50 percent of their teenager respondents who had fallen pregnant”. It implies that teenage pregnancy can trigger a high level of emotional strain in a teenager.

Teenage pregnancy can also cause psychological developmental problems. During adolescent pregnancy, certain intense affects are aroused (Stuart & Wells, 1992:35). For example, research revealed that pregnant teenagers face many self-esteem problems because of how their bodies have changed, as well as the psychological demands of pregnancy that are superimposed on adolescence (Wood, 2012:2). The state of pregnancy amongst most adolescents often leads to bad marriages or severe marital problems which in turn cause psychological distress, loss of self-esteem and further self-destructive behaviours like drug abuse (Stuart & Wells, 1992:36). According to Wood (2012:5), some teenagers who fall

pregnant feel they have gone against their parents or religious beliefs and are frowned upon by others. The self-esteem or sense of worth of such adolescents may be negatively affected.

The humanistic perspective stresses people's capacity for personal growth, freedom to choose their destiny and positive qualities, thus loss of self-esteem which may result from teenage pregnancy can make the teenager unable to carve a positive future path (Santrock, 1998:452). Abraham Maslow's hierarchy of needs stresses that individual needs must be satisfied in a specific sequence - physiological, safety, love and belongingness and esteem - to lead to self-actualisation (Santrock, 1998:453). It implies that teenage pregnancy and its psychological challenges for personal growth may interrupt the teenage girls' quest for self-actualisation. Self-actualisation is the highest and most elusive of Maslow's needs, the motivation to develop one's full potential as a human being (Santrock, 1998:452). The pregnant adolescent, who is riddled with anxiety due to pregnancy, may not wholeheartedly pursue goals of prestige and self-actualisation thus impacting normal psychological development of the adolescent mother.

In view of Erikson's theory of psychosocial development, pregnancy may also affect identity formation in the pregnant adolescent. According to Erikson, during adolescence young people enter the stage of identity versus role confusion (Slavin, 2009:48). Forming an identity involves committing oneself to a set of beliefs, values and adult roles. Adolescents who fall pregnant may feel that they have failed to form an identity, hence may experience a state of confusion (Santrock, 1998:73). It implies that teenage pregnancy can negatively impact the psychosocial development of an adolescent.

1.4.1.4 Moral development and teenage pregnancy

Moral development involves the formation of a system of values on which to base decisions concerning right and wrong or good and bad (Boeree, 2009:1). McDevitt and Ormrod (2010:575) explain that moral development entails advancements in reasoning and behaviours in accordance with culturally prescribed or self-constructed standards of right and wrong. It means that a person's values influence moral decision making. It also shows that each society develops its own set of norms and standards for acceptable behaviour, hence morality is entirely culturally conditioned (Boeree, 2009:2). Moral judgments may thus differ from culture to culture.

Matlala (2011:2) explains that, according to Piaget and Kohlberg's theories of moral development, "moral reasoning is a function of cognitive development and so moral development continues from birth to adolescence". Piaget and Kohlberg also hold the view that morality and moral judgments are delivered to the developing child from society (Rutherford, 2011:417), which compounds the notion that culture influences moral decision making.

The adolescent years are an intense and critical time for moral development. Social influences, for instance, can affect adolescent moral decision making. For example, peer-oriented morality or "morality of conformity, where right or wrong is determined not by authority but by one's peers" (Boeree, 2009:2), is frequently found among adolescents. In other words, peer pressure can negatively affect adolescents' decision making especially pertaining to sexual matters. It is partly because adolescence is a developmental period of further expansion of relationships outside the family and into the broader arenas of society and that is why Max (1993:57) describes adolescence as a period of loosening and expansion for adolescents. It means that as adolescents expand their relationships to include people outside the family such as peers, their moral judgments can be affected.

Adolescents try to think more rationally in an attempt to become independent, especially from parental influence (Welton, 2011:1). It means that teenagers are capable of defining their own morals and values, whereas previously they were following in most cases a set of rules from parents and other significant adults (Ehow, 2013:2). Therefore, the obvious and sometimes abrasive differences in values and customs between teenagers and their parents or even older siblings begin to manifest themselves (Max, 1993:58). The adolescent may thus begin to question previously acquired values during her teenage years in her quest to search for an identity. But in doing so, the adolescent's moral decision making can be adversely affected, especially when the adolescent tries different points of view such as inappropriate sexual practices that can lead to teenage pregnancy.

Besides peer influence in moral decision making, cognitive development is a gradual process that extends to adulthood, hence many adolescents face challenges or limitations in moral decision making, especially those involving their sexual behaviours (Arnett, 2013:61). Adolescents need moral reasoning to evaluate their actions, to understand the consequences of teenage pregnancy and, more importantly, to abstain from dangerous sexual activities such as early dating and unprotected sex. Wilson (2010:1414) explains that many adolescents

choose to have sex while not choosing to use birth control; hence many teenage pregnancies are not planned. Because of their cognitive limitations and failure to think in more abstract terms, the consequences or negative implications of their inappropriate sexual activities may not be so apparent to female adolescents.

1.4.1.5 Social development and teenage pregnancy

The interpersonal or relational factors cover the social and environmental contexts in which teenagers fall pregnant. Brown (1999:126) asserts that, according to Bronfenbrenner's bioecological theory, interpersonal or relational factors include the settings within which the individual directly interacts. These are the settings with the most immediate and direct impact on a female adolescent's biological, emotional and psychological development. Examples of relationships include family and peer relations. Panday et al. (2009:31) contend that interpersonal factors such as family and peer relationships provide social identity, support and role definition since they provide the immediate settings for interaction with the individual. At this level, relationships have an impact in two directions: away from the female adolescent and towards the female adolescent. A female adolescent's siblings, for instance, may affect her beliefs and behaviour but on the other hand the female adolescent also affects the behaviour and beliefs of the siblings during the process of interaction (Spear & Lock, 2003:290).

By implication to this study interpersonal relationships, particularly family and peer relations, influence the female adolescent perceptions of teenage pregnancy. In many family set-ups, for instance, research has revealed that the sister of a teenage mother is twice as likely to follow in her footsteps due to the effects of modelling (Cohen, 2011:36). Bandura's social learning theory posits that people learn from one another through observation, imitation and modelling (Woolfolk, 2010:351; Rogers, 1995:331), thus a pregnant teenage girl can influence her siblings to follow in her footsteps, especially when the teenage pregnancy is viewed positively. The peer effect on girls aged 16-19 was shown to have a far more powerful impact than any education and advice given at school (Cohen, 2011:34), implying that peer pressure can be instrumental in promoting teenage pregnancy. This implies that sex education programmes must also have more thrust on addressing the peer effect.

Teenage pregnancy can also affect the social development of a pregnant adolescent. For example, while other teenagers are out having fun, the pregnant teenager may have to stay at home nursing her sore feet or back or may spend her time preparing for the baby's arrival

(Booker, 2010:2; Wood, 2012:3). Mood swings will be worse than what they already are and that can make going to school and healthy relationships with peers and friends very difficult (Ehow, 2013:1; Weiss & Correia, 2012:5). The feeling of guilt in the teenager may also force the teenager not to relate well with parents, friends and other people in the community, thereby reducing social contact. Teenage pregnancy can therefore rob a young person of her youth and thus affect normal adolescent social development. Vincent (2012:3) asserts that teenage pregnancy can thus both be a cause and consequence of social exclusion. Chigona and Chetty (2008:144) posit that teenage mothers are not always well received by their peers, and it fuels a sense of isolation and stigmatisation which undermines their experience of school as a nurturing space. Vincent (2012:4) asserts that teenage mothers create discomfort and wariness in people through their embodied confirmation of uncontained and unconstrained adolescent sexuality. It implies that the public generally does not respect teenage pregnancy, thus most pregnant teenagers experience ambivalent responses from them.

The high rate of teenage pregnancy also creates a situation whereby non-pregnant adolescents can model bad behaviour. The Guttmacher Institute (2010:108) posits that the social learning theory asserts that an individual's capacity to serve as a model of behaviour is enhanced when that person interacts frequently with another. Thus sisters of childbearing teenagers have disproportionately higher teenage pregnancy rates and birth rates. In one study, for example, young women whose sisters had had a teenage birth had teenage childbearing rates more than twice those of same age females within a matched census tract (Guttmacher Institute, 2010:109), so teenage pregnancy affects adolescent social development as it may promote modelling of inappropriate sexual behaviours. It implies that the high rate of teenage pregnancy makes the non-pregnant teenagers observe and imitate such behaviours, thereby leading to even higher rates of pregnancies.

1.4.2 Influences on teenage pregnancy

There are many internal and external forces within the ecological environment that influence African female adolescents' sexual behaviours and teenage pregnancy. In other words, female adolescents are faced with several environmental influences that can shape their perceptions and meanings of teenage pregnancy. Bronfenbrenner (1979:31) argues that in order to understand human development, one must consider the entire ecological system in which growth occurs. Taking the ecological systems theory into perspective, it shows that in

order to understand African female adolescents' experiences and perceptions of teenage pregnancy, one has to consider the entire ecological system in which adolescents develop.

Bronfenbrenner's bioecological theory postulates that every person lives, learns and develops within a set of nested systems from the immediate family to neighbourhoods and schools, to community and society (Woolfolk, 2010:19). The environmental influences start with direct influences on the adolescents (i.e. within the microsystem) such as the physical, emotional, social and moral developmental changes of the adolescents already discussed (McDevitt & Ormrod, 2010:16). It is within the immediate environment of the microsystem that proximal processes (e.g. immediate family and peers) operate to produce and sustain development (Bronfenbrenner, 1977:515).

Bronfenbrenner further suggests that the environmental influences progress outwards until they have minimal or indirect influences (McDevitt & Ormrod, 2010:16). In other words, the ecological subsystems range from the microsystem which refers to the relationship between the developing person and the immediate environment to the macrosystem which refers to institutional patterns of culture such as the economy and customs (Woolfolk, 2010:19; McDevitt & Ormrod, 2010:16). In the context of this study, there are other subsystems of the bioecological systems that influence the perceptions of adolescents, although the adolescents may not be directly involved, such as culture, globalisation, media, socioeconomic and social networks.

1.4.2.1 Culture

Owens (2002:10) posits that the culture of any population includes customary ways of behaving and frames of reference that encompass standard ways of making a living, expressing affection and getting married in society. It implies that culture and children's development are inseparable; each is an expression of the other (Trommsdorff & Chen, 2012:5). The socio-cultural context of society can thus influence the perceptions of adolescents about teenage pregnancy. A person's behaviour generally expresses his/her culture. The cultural norms and values of a society, for instance, can be used to determine whether sexual behaviour is right or wrong. Clockland and Wong (1999:105) posit that the teenage use of contraception is viewed differently by different cultures, for example, some view it as wrong for a teenage girl to use contraception for fear of promoting promiscuity. Some cultures may support a more tolerant attitude toward teenage childbearing, thus providing less of a deterrent to early unprotected sexual activity (Simigiu, 2012:1).

The different meanings/perceptions which African adolescents attach to the experience of teenage pregnancy can play a vital role in determining the rates of teenage pregnancy. Ziyane and Ehler (2006:32) conducted a study with Swazi youths and found that youths bear children during adolescence to prove their fertility, and in so doing prove their marital value. Macleod and Tracey (2010:8) also revealed that pregnancy in some African cultures is understood as the epitome of womanhood, suggesting that the cultural value placed on fertility is quite big in such cultures. It shows that some adolescents may fall pregnant to prove their fertility and hence their womanhood. Iliffe's (2005:13) research revealed that there is a strong acceptance of teenage pregnancy among African families in KwaZulu-Natal, South Africa, in the 21st century. Allen and Dowling (1998:23) assert that some teenagers actually plan their pregnancy and view early motherhood as a chance to create a new identity which will change their life course for the better. For example, some teenage mothers, especially in African cultures, believe that the arrival of a baby forces reappraisal of social relations, including those with male partners (Allen & Dowling, 1998:23). Hlapa's (2006:17) research also revealed that, "In Limpopo it is culturally wrong for a woman to reach the age of 21 without a child. It does not matter whether you are married or not, you have to have a child to prove you are not barren". It implies that the recognition of motherhood is an important path to social status and personal achievement in some black cultures. Research revealed that there is a high rate of adolescent childbearing in many African cultures. Macleod and Tracey (2010:13) concur by asserting that it is well documented that there are large differences in adolescent childbearing between blacks and whites.

Minnick and Shandler's (2011:241) research also reveals that idealised beliefs about pregnancy and child rearing play an important role in understanding the phenomenon of teenage pregnancy, for instance "some adolescents from certain cultures perceive that giving birth as a teenager is easier because they are young and healthy". In other words, some adolescents have insufficient knowledge about health complications associated with adolescent pregnancy. Some adolescents think that the teenage period is the appropriate time to fall pregnant because they would be healthy and strong enough to give birth. When adolescents have such perceptions about pregnancy they are less likely to take preventive measures against pregnancy.

The study carried out by Sodi (2009:52) revealed that adolescents in non-African cultures, for instance, viewed pregnancy as a stumbling block that interferes with developmental processes and educational opportunities. Some of the respondents in this study indicated that they

viewed teenage pregnancy as a confusing experience because it normally comes without planning for it (Sodi, 2009:53). In other words, some adolescents view teenage pregnancy as something that impinges on their educational aspirations and progress. It implies that adolescents of different cultures can view teenage pregnancy negatively or positively. It is therefore an indication that the context in which adolescent female learners become mothers cannot be overlooked.

1.4.2.2 Globalisation, media, social networks and social transformation

Changes and transitions in the global world have had a fair share of influences on teenage pregnancy. According to Baker (1996:76), research findings show that “the young people of today are living in an exciting and dangerous time, with an increasingly diverse and mobile society, with new technologies and expanding opportunities”. The current society becomes diverse because we are now living in a global village where young people are exposed to or mix with a variety of people through the media, technology, and improved transport systems. The mobility of society implies that the young adolescents of today live in an environment rapidly changing due to globalisation. Globalisation includes “the greater movement of people, goods, capital and ideas due to improved economic integration and improved technologies” (Picard, 2011:23).

The way in which issues of sexuality are viewed and managed today within the wider society mediated by the media and technology has had its fair share of influences on teenage pregnancy. Young people can now easily access pictures of a sexual nature through the media and internet. For example, exposure to materials of a sexual nature like pornographic pictures, increased accessibility to social networks, media exposure to sexuality and advancement of technology like computers and cell phones have had some influences on adolescents’ sexual orientations. The social networks and internet, for example, expose teenagers to a diversity of peers and people of different cultures who can influence them to indulge in inappropriate sexual behaviours. Vincent (2012:4) posits that “young people are constantly exposed through the media to sexuality explicit messages but at the same time are expected to remain sexually innocent and inexperienced”. Accessibility to such messages, pictures and films has had some influences on inappropriate sexual behaviour such as early dating, which can result in teenage pregnancies. Stern (2007:3) also highlights the effects of the media, social networks and technology on teenage pregnancy by asserting that “fast-paced, multi-networked environments across different races, genders, classes, religions, and

vast geographic locations” have a bearing on the adolescents’ view of their sexual behaviours and identities. Sexual roles and preferences for example, are conveyed online and these are formed in large part before adulthood, and that is specifically during adolescence. Stern (2007:1) further reiterates that millions of teenagers “create and manage” their own “social worlds through instant messaging”, which includes social networks such as Facebook, WhatsApp and Twitter. Most adolescents today participate in computer-mediated communication to explore alternate sexual identities.

Cherry, Dillion and Rugh (2001:ix) also posit that “societies around the world are in a state of transformation, creating a dizzying array of new possibilities and new challenges for teenagers and young adults” to explore and experiment with new roles. These changes bring both challenges and new possibilities to adolescents; for example, the wave of democracy that is sweeping through most societies in the world brings both positive and negative influences to adolescents. In South Africa, for example, there was a transition from apartheid to democracy and that meant more rights and freedom of association. The challenge of the youth of today is to exercise that freedom with responsibility.

1.4.2.3 Socio-economic status

The socio-economic “conditions and the cultural context of society may either enable or serve as a barrier to healthy behaviour” (Panday et al., 2009:32). Spear and Lock (2003:398) posit that a large fraction of the adolescents who continue with their pregnancies to full term come from disadvantaged or dysfunctional socio-economic milieus. According to Spear and Lock (2003:392), studies carried out in Canada and the United States have revealed that adolescent mothers from disadvantaged socio-economic backgrounds view the arrival of an infant as entitlement to employment assistance benefits. In South Africa, Bunga, Amoko and Ncayiyana (1996:27) documented that “different perceptions are also common among teenagers from disadvantaged backgrounds and those who have low future aspirations”. Some view early pregnancy in a good light since it gives them child support grants (Bruckner, Martin & Bearman, 2004:24). Lack of material resources can also influence young girls to get into relationships with men of better economic standing and thus may not give them enough power to negotiate safe sexual practices. In so doing they become susceptible to teenage pregnancy. Allen and Dowling (1998:23) assert that socio-economic disadvantage, “cultural determinants, such as arranged marriages and the requirements to early fertility exert pressures on teenagers” from some African and minority ethnic

backgrounds. In most cases socio-economic disadvantages are associated with black cultures and minority ethnic groups.

1.4.3 Consequences of teenage pregnancy

There are several consequences associated with teenage pregnancy in the world. Consequences of teenage pregnancy can be grouped into layers which include personal, family, community, national and global consequences. In view of the ecological systems perspective, the consequences of teenage pregnancy do not only affect the female adolescent concerned but spreads throughout the different layers of the ecosystem.

1.4.3.1 Personal consequences

Personal consequences are those consequences that affect the teenage pregnant girl directly such as educational problems, health problems, adolescent development related problems and poverty.

Teenage pregnancy has educational implications. Dryburgh (2000:11), for example, explains that teenage pregnancy can curtail education thereby reducing a young woman's employment opportunities. The pressure of school work and the demands of pregnancy can create an emotional crisis that can force the teenage girl to abandon school.

Poverty is one of the critical social outcomes associated with teenage pregnancy. Dube (2011:1) contends that 67 percent of families started by teenage mothers live in poverty, and 52 percent of all mothers currently on welfare in South Africa had their first child as a teenager. Meece and Daniels (2008:117) explain that teenage mothers are likely to drop out of high school and almost half will never finish. Such teenage mothers may become poor due to their inability to secure good employment opportunities which in most cases are determined by sound educational backgrounds. The researcher believes that the teenage mothers drop out of school mainly because of their failure to withstand the pressure of the demands of raising a child and coping with schoolwork. School age pregnancies therefore can lead to unstable employment due to poor qualifications thus most likely render the teenage mother and child to abject poverty.

1.4.3.2 Family consequences

Teenage pregnancies have far reaching family implications. The wellbeing of babies born of teen mothers is an issue of concern. Dube (2011:1) explains that since teenagers often do not

practice optimum prenatal care, babies born to teenage mothers are more likely to be born prematurely and have low birth weight. They are also more likely to suffer abuse and neglect than children born to mothers older than 20 years of age probably because of the inexperience of teenage mothers in raising children (Dube, 2011:1). Due to poverty the children of teenage mothers have more chances of being delinquents, are more inclined to antisocial behaviour and are therefore more likely to commit crimes. The socio-economic disadvantage of the teenager is thus both a cause and a consequence of teenage pregnancy. It shows that the low socio-economic status of an adolescent can cause teenage pregnancy which in turn may promote poverty.

Teenage pregnancy is also associated with domestic violence and family disruptions (Kissin, Anderson, Kraft, Warner & Jamieson, 2008:365). Domestic violence can emanate from male partners who might be unwilling to accept responsibility for the pregnancy. Family disruptions may also occur if the added responsibility of the new teenage baby is viewed negatively by family members, especially parents or guardians, thus resulting in poor family relations. Studies from sub-Saharan Africa, USA and Europe have indicated that teenage mothers face a high frequency of physical abuse (Ayuba & Gani, 2012:45-50; Malahlela, 2012:2). The abuse is likely to come from family members, the husband or father of the child, especially when the pregnancy is not accepted. The babies of teenage mothers can add economic pressure to most families and as a result such babies may not get enough love and care.

1.4.3.3 Community, national and global consequences of teenage pregnancy

Teenage pregnancy and teenage child bearing are linked to a host of critical social issues in the community, South Africa (in this study) and the world. Teen pregnancy seems to have become a normal issue in many communities in South Africa. Some teachers, parents and communities seem to have accepted that they cannot change the situation. Lesch and Kruger (2005) contend that the high rates of teenage pregnancy among black and coloured population groups have made it a normal phenomenon, implying that many communities in South Africa tend to accept the problem of teenage pregnancy due to its high incidence without radical measures against it. Due to the high incidence of teenage pregnancy in Belfast, people seem to have accepted that it is a problem to live with. One of the most worrisome predicaments is that the costly outcome of teenage pregnancy is more likely to be intergenerational implying that teenage pregnancy triggers a vicious cycle of problems in

communities the world over such as poverty, crime, school dropout and indiscipline. Literature endorses that learning and psychosocial problems are generally evident in children of teenage mothers (Panday et al., 2009:80). Meece and Daniels (2008:120) contend that indiscipline and low socio-economic status place the daughters of teenage mothers at risk of an early pregnancy, and the cycle repeats itself. There is great need therefore to break these cycles by addressing the problem of teenage pregnancy in the communities of Belfast, South Africa and the world at large.

The other consequence of teenage pregnancy is that it promotes gender inequity due to the fact that the pregnant teenage mother mostly depends on the more economically advantaged male partner. Jewkes et al. (2009:11) reiterate that teenage pregnancy “limits the life opportunities of young women and in so doing, contributes to gender inequality and perpetuates the subordinate position of women”. Panday et al. (2009:80) also explain that “teenage pregnancy feeds into existing gender imbalances by rendering the young teenage mother more vulnerable and reliant on male partners, thus exposing them to negative self-perceptions”. The teenage mother is normally left with the sole responsibility of the child whilst the father of the child continues with his life or schooling without much interruption.

The teenage mother who does not finish school is likely to rely more on the male partner for support. The teenage mother, with limited economic power, is likely to assume an inferior position as compared to her male partner. It implies that teenage pregnancy can promote a negative self-concept in the teenage mother.

Teenage pregnancy has implications on government expenditure and public costs the world over. Meece and Daniels (2008:117) assert that “early childbearing is one of the strongest factors associated with poverty and welfare dependency”. Teenage childbearing costs taxpayers a lot of money each year, including public sector health care costs, increased child welfare costs, and child care grants (Dube, 2011:1). Research (e.g. Weiss, 2009:1; Singh & Darroch, 1999:14) has indicated that because only a small number of adolescent mothers marry and stay married to the child’s father, many women rely on government assistance. The same picture prevails in Belfast, Mpumalanga in South Africa.

1.5 PROBLEM STATEMENT

1.5.1 Statement

South Africa has undergone significant socio-economic and political shifts since the 1990s when a large body of literature on teenage pregnancy was generated (Albertyn, 2015:2; Macleod, 2003:23). The year 1994 marked the end of apartheid and that meant socio-economic and political shifts that occurred influencing many South African citizens for instance female independence, human rights and the legislation of abortion in 1996 (Maphosa & Shumba, 2010:387; Panday et al., 2009:9). These changes brought new perceptions of teenage pregnancy, because adolescent female learners had freedom of choice and new life alternatives (Jewkes, Vundule, Maforah & Jordan, 2001:733). Perceptions of teenage pregnancy have shifted significantly over the past decades strongly influenced by increasing educational and economic aspirations and opportunities such as the right to continue with education after pregnancy, therefore regular studies on teenage pregnancy are required in keeping with changes in cultural, political and socio-economic conditions in South Africa (Panday et al., 2009:62). The primary aim of this study was to allow African female adolescent learners to explore the phenomenon of teenage pregnancy. Hence the main question that directed this study was: **What are the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga?**

1.5.2 Sub-research questions

The following sub-research questions guided the researcher throughout the literature as well as the empirical study:

- (i) How do the developmental phases in adolescence influence teenage pregnancy?
- (ii) How does teenage pregnancy have an impact on adolescent development?
- (iii) What are the contributing factors and conditions that promote teenage pregnancy?
- (iv) What are the consequences of teenage pregnancy?
- (v) How do female adolescents perceive the experience of teenage pregnancy?

1.5.3 Aims of the study

1.5.3.1 General aim

To do a literature review and empirical study about female adolescents' experiences and perceptions of teenage pregnancy.

1.5.3.2 Specific aims

To do a literature review on:

- (i) The developmental phases in adolescence and their influence on teenage pregnancy.
- (ii) Teenage pregnancy and its impact on the developmental phases of adolescents.
- (iii) The contributing factors and conditions that promote teenage pregnancy.
- (iv) The consequences of teenage pregnancy.
- (v) Adolescents' perceptions of their experience of teenage pregnancy.

To conduct an empirical study on:

- (i) The developmental phases of adolescence and their influence on teenage pregnancy in Belfast, Mpumalanga.
- (ii) The impact of teenage pregnancy on the developmental phases of the female adolescents in Belfast, Mpumalanga.
- (iii) The contributing factors and conditions that promote teenage pregnancy amongst adolescent female learners in Belfast, Mpumalanga.
- (iv) The consequences of teenage pregnancy amongst the adolescent female learners in Belfast, Mpumalanga.
- (v) How female adolescents in Belfast, Mpumalanga perceive the experience of teenage pregnancy.

1.6 SIGNIFICANCE OF THE STUDY

The study explored the female adolescents' experiences and perceptions of teenage pregnancy in general and then more specifically in Belfast, Mpumalanga. The researcher hoped to get an understanding of female adolescent learners' interpretations of the reality of teenage pregnancy as they perceive it (see Leedy, 1997:16). In other words, the researcher

sought to understand the lived experiences of teenage mothers including the meanings they attach to teenage pregnancy. This research would be significant because the female adolescents' experiences and perceptions of teenage pregnancy would hopefully enhance the researcher's understanding of the phenomenon of teenage pregnancy. Mills and Birks (2014:183) posit that a person's subjective perception of reality is important for research because it motivates people to act. The female adolescents' experiences and perceptions of teenage pregnancy were worth studying because they could help to illuminate the motivations of African female adolescents' sexual behaviours. Engaging the African female adolescent learners to reflect on their lived experiences and to articulate their perceptions, personal meanings or views would thus hopefully provide a rich resource of information necessary to handle teenage pregnancy specifically in Belfast, but hopefully also elsewhere in the world. The understanding and awareness of the perceptions of adolescent female learners would hopefully emerge most strikingly in the richness of the female adolescents' narratives of their experiences, perceptions and personal meanings of teenage pregnancy. Luker (1996:11) aptly posits that:

Today's teenagers live in a world whose demographic, social, economic and sexual circumstances are almost unimaginable to older generations. Unless adults begin to understand that world, complete with its radically new circumstances, most of what adults tell teenagers will be ineffective.

It is in this regard that this study became very significant. The researcher needed to understand the female adolescents' experiences and perceptions of teenage pregnancy as they saw it so that it could be easier to manage this phenomenon.

This study was also significant mainly because "pregnancy is amongst the major concerns that pose a serious threat to schools" and the throughput rate of learners (Motshekga, 2009:1). Some teenage girls, for example, drop out of school under pressure from the demands of having a child as well as keeping up with school work, thus in most instances it means loss of potential for schools. This study could therefore provide a basis for the identification of prevention measures of teenage pregnancy. The findings of this study would hopefully contribute significantly towards the refinement of the life orientation curriculum and sexuality education programmes as well as to enrich policy formulation.

1.7 THEORETICAL FRAMEWORKS

Bronfenbrenner's bioecological theory was used as the main theoretical framework for this research. According to Bronfenbrenner's (1979:3) bioecological theory, adolescents do not develop in a vacuum but rather develop within the multiple contexts of the family, community and country (Matlala, 2011:69). It is on this basis that the researcher believed that Bronfenbrenner's influential conceptual model would help the researcher to understand the influences of the social contexts in which adolescents live, especially with regard to their sexual behaviours and teenage pregnancy.

The researcher also made use of other theoretical frameworks by Sigmund Freud, Erik Erikson, Jean Piaget, Lev Vygotsky, Albert Bandura and Lawrence Kohlberg to further explore the African female adolescents' motivations, convictions, assumptions and perceptions of teenage pregnancy.

According to Freud and Erikson's psychoanalytic theories, at each stage of maturation certain drives, needs or conflicts emerge that influence the way a child relates to the environment (Meece & Daniels, 2008:129). Our behaviour, according to Freud, is not the result of current economic or social situations or of the use of reason, but more a result of psychosexual drives (Rathus, 2006:7). By implication, in this study the researcher believed that the drives, needs and conflicts that emerge in adolescence might help to explain their sexual behaviours.

Piaget's theory of cognitive development helped the researcher to understand the thinking patterns of adolescents especially in sexual decision making. In the formal operations stage, for instance, adolescents can think about things they have never experienced, for example sexual acts (McDevitt & Ormrod, 2010:198; Woolfolk, 2010:38). On the other hand, Piaget's and Kohlberg's theories of moral development helped explain the adolescents' moral judgments concerning their sexual acts and the consequences thereof.

Bandura's social learning theory emphasises the power of observation, imitation and modelling (Bandura, 1977:12). It means that most human behaviour is learned observationally through modelling. By implication, in this study Bandura's social learning theory helped the researcher to understand how adolescents' sexual behaviours are influenced by, for example, peers, media exposure and social networks.

The sociocultural theory proposed by Vygotsky emphasises that adolescents and adults are social beings who are greatly influenced by the people and cultures in which they live (Rathus, 2006:26). Vygotsky's major premise is that an adolescent's internal processes have their roots in interactions with others (Vygotsky, 1978:57). Vygotsky's sociocultural theory thus helped the researcher to understand how, for instance, African cultural values, beliefs and practices influence adolescents' sexual behaviours and their perceptions of teenage pregnancy.

1.8 RESEARCH DESIGN AND METHODOLOGY

1.8.1 Research design and approach: Exploratory research design and qualitative research approach

An exploratory research design and a qualitative research approach were employed in this study. An exploratory approach is conducted for a problem that has not been clearly defined such as the problem of teenage pregnancy in Belfast (Brown, 2006:43). It is flexible and can address research questions of all types such as what, how, and why questions (Saunders, Lewis & Thornhill, 2007:134). In other words, the exploratory research design was appropriate for this study because the researcher wanted to have a better understanding of the phenomenon of teenage pregnancy.

Ereaut (2011:45) explains that "qualitative researchers aim to gather an in-depth understanding of human behaviour and the reasons that govern such behaviour". The qualitative researcher "seeks to discover the meanings that participants attach to their behaviours", and what their perspectives are on particular issues (Groenewald, 2004:34). The qualitative approach was appropriate for this study because the researcher was studying the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga. The general aim of the qualitative approach is to understand reality from the standpoint of the individual in his or her context and thus makes it appropriate for this study. "Qualitative researchers are interested in matters of motive and in the quality of experience undergone by those in the situation studied", in other words their "lived experiences" (Eisner, 2017:35). A qualitative research approach is used "to gain insight into people's attitudes, behaviours, value systems, concerns, motivations, aspirations and culture" (Ereaut, 2011:45), or lifestyles (Groenewald, 2004:34); therefore, the qualitative approach was applicable to this study that explored the female adolescents' experiences and perceptions of teenage pregnancy.

1.8.2 Research paradigm: phenomenology

This research aimed to gain an in-depth understanding of the female adolescents' experiences and perceptions of teenage pregnancy; therefore, the phenomenological paradigm was the most appropriate for this study. The phenomenological paradigm was preferred since it aims to understand the experiences, meanings and perceptions of a human being from the perspective and standpoint of the person who is having the experience. The study endeavoured to establish the essential meanings "of the phenomenon under study, instead of creating abstract theories about the same phenomenon" (Decastro, 2003:3). Mills and Birks (2014:184) posit that this paradigm goes from "the concrete description of the experience of a given subject" to the interpretation of his or her experience. The phenomenological paradigm therefore helped to discover the meanings that African female adolescents attach to their sexual behaviours and how they perceive the experience of teenage pregnancy.

1.8.3 Data collection

Data gathering in this study included a literature review and individual semi-structured interviews.

1.8.3.1 Literature review

The study involved a review of literature on adolescent developmental stages to ascertain its influence on teenage pregnancy as well as the effects of teenage pregnancy on adolescent development. A review of literature on the perceptions, causes, contributing factors and consequences of teenage pregnancy are discussed. Matlala (2011:27) posits that "the functions of the literature study are to define and limit the research problem, place the study in a historical perspective, select promising methods and measures and relate the findings to previous knowledge". The literature study includes a review of documentation such as internet information, periodicals, books, journals, published and unpublished dissertations.

1.8.3.2 Empirical study

Banyard and Grayson (2008:444) posit that "the academic discipline of psychology is grounded on empirical inquiry and empirical inquiry is any kind of research which involves data collection". The empirical component of this study includes selection of participants and data collection by use of semi-structured interviews and data analysis.

1.8.3.2.1 Research participants

Seale, Gobo, Gubrium and Silverman (2004:17) posit that the process of finding interviewees or participants and setting up interviews is central to the outcomes of the research. Seale et al.'s (2004:17) assertions underscore the need to select knowledgeable participants with a range of views "relevant to the research questions". The research participants in this study consisted of 20 African female adolescent learners who experienced teenage pregnancy to full term, selected from three secondary schools in Belfast, Mpumalanga. The 20 participants participated in individual interviews. The individual face-to-face interviews allowed the researcher to get direct responses from individual participants. The collective meaning making process of the 20 participants enhanced the researcher's understanding of teenage pregnancy.

1.8.3.2.2 Selection of participants

A non-probability purposive sampling method was applied where adolescent female learners who were likely to be knowledgeable and informative about experiencing teenage pregnancy and were well versed in English were selected to address the purpose of the study. Denzin and Lincoln (2005:134) posit that "purposeful sampling involves the selection of participants who have knowledge or information related to the purpose of the study". In purposive sampling, participants are selected because they have characteristics or experiences that are representative of many others (Denzin & Lincoln, 2005:134; Chrisler & McCleary, 2010:182). In other words, "purposive sampling techniques ensure a homogeneous sample of participants with common characteristics and experiences" (Callary, Rathwell & Young, 2015:65). Denzin and Lincoln (2005:134) assert that "the goal of purposeful sampling is not to obtain a large representative sample; the goal is to select persons, places or things that can provide the richest and most detailed information to help us answer our research questions".

Taking cognisance of the above, the researcher conducted the research at three secondary schools in Belfast, Mpumalanga. The researcher decided up front to use more or less 20 participants for individual interviews. Only self-volunteered female adolescent learners from Grades 10-12, who experienced teenage pregnancy to full term, with the knowledge of their parents/guardians and the respective schools were interviewed individually. The upper grades were more fluent in English and were able to express their perceptions better in English. Permission to identify the participants and to conduct the research was sought from The Department of Education Mpumalanga (Nkangala District), The Department of Education

Mpumalanga (Emakhazeni Circuit), the principals and the School Governing Bodies (SGBs) of the three secondary schools in Belfast, Mpumalanga in South Africa.

1.8.3.2.3 Data gathering/collection methods

An empirical study was undertaken to investigate the African female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga. In this study semi-structured interviews were conducted to explore the African female adolescents' experiences, perceptions and meanings of teenage pregnancy. The empirical findings of African female adolescents' experiences and perceptions of teenage pregnancy enabled the researcher to compare it with the literature review findings of teenage pregnancy at national and international levels.

Semi-structured interviews

Delamont (2012:129) posits that a researcher “can develop an enhanced research relationship with research participants through the use of in-depth, semi-structured interviews”. O’Hara, Carter, Dewis and Wainwright (2011:171) assert that a semi-structured interview schedule is structured but gives the researcher room for flexibility in questioning. In other words, semi-structured interviewing gives the researcher an opportunity to explain and expand on questions to ensure that participants understand what has been asked of them. The role of the researcher is to explore the participants’ actions, views, beliefs and meanings through flexible use of an interview schedule which allows additional and probing questions to gather more in-depth data (O’Hara et al., 2011:171). In semi-structured interviews, “the use of open-ended questions and probing allows participants to respond in their own words, rather than forcing them to choose from fixed responses” (Callary et al., 2015:65). Hence they “have the ability to evoke responses that are meaningful and culturally salient” to the participants (Callary et al., 2015: 66).

The semi-structured interviews were conducted with 20 African female adolescent learners who fell pregnant at school. Each participant was interviewed individually and the interviews were recorded on a digital recorder. Matlala (2011:29) asserts that “individual interviews (recorded on audio) are a valid method of data collection, information or opinion gathering”. When data is audio recorded it allows the researcher to transcribe the data at his/her own pace and the researcher can also refer to them at any time whenever necessary. It is thus a convenient and safe way of data storage.

The researcher believed that an open-ended dialogue between him and the participants was paramount in this research as this could lead the researcher to see things in a new light. The purpose of this study was to illuminate the specific, to identify the phenomenon of teenage pregnancy through the eyes of the African female adolescent learners in Belfast, Mpumalanga. The main purpose was to gain insight into the African female adolescent learners' experiences and perceptions, cutting through the cluster of taken for granted assumptions of the phenomenon of teenage pregnancy (see James et al., 2012:191). The main question that was asked to participants was: **Tell me about your experience of falling pregnant as a teenager?**

1.8.3.2.4 Data capturing techniques, analysis and interpretation

The data was captured through the use of audio-tape. All conversations were transcribed. After transcribing the data, the researcher worked closely and intensively with the texts, annotating them closely ('coding') for insights into the adolescent female learners' experiences, perceptions and meanings of the phenomenon (Kleiman, 2004:8; James et al., 2012:190) through using Tesch's data analysis method. "[A]s the analysis develops, the researcher will catalogue the emerging codes, and subsequently look for patterns in the codes (themes). Themes are recurring patterns of meaning (ideas, thoughts, and feelings) throughout the texts" (James et al., 2012:192). Themes help the researcher to identify those things that matter to the participants.

Data representation was done in narrative format. In order to support the themes and ideas generated by the researcher from the participants' interviews, the researcher directly quoted parts of the interviews.

1.9 TRUSTWORTHINESS OF RESEARCH STUDY

Noble and Smith (2015:34-35) note that "evaluating the quality of research is essential if findings are to be utilised in practice and incorporated into care delivery". The researcher believed that the findings in this study were no exception to the above; hence there was a need to take into account the trustworthiness of the research outcomes. To establish trustworthiness and credibility of this research, the researcher took into account measures of trustworthiness that included: credibility, transferability, dependability, trust of participants and confirmability of the research, which are discussed in more detail in chapter four.

1.9.1 Credibility

Seale et al. (2004:405) assert that credibility pertains to validation of findings which in turn establishes confidence in the truth of the findings. Morrow (2005:252) contends that credibility is a kind of internal consistency whereby the researcher ensures rigour in the research process and also entails how the researcher communicates the research activities to others. To ensure credibility and to establish confidence in this study the following measures were taken into account by the researcher: member checks, triangulation and prolonged engagement. Triangulation involves the use of different methods of data collection (Sherton, 2004:64) such as individual interviews, literature study and member checking which were used by the researcher in this study. Member checks, according to Anney (2014:276), mean that the data and interpretations are continually tested as they are derived from participants. In this study the researcher checked the accuracy of the data from participants so as to confirm participant responses. Prolonged engagement involves spending reasonably lengthy time with participants to establish trust and good rapport (Lincoln & Guba, 1985:301). It implies that if participants establish trust in the researcher they are likely to give credible responses. The adolescent female learners in this study were most likely to have trust in the researcher since the researcher had been teaching in Belfast since 2009.

1.9.2 Transferability

Anney (2014:277) posits that transferability refers to the degree to which the results of qualitative research can be transferred to other contexts with other participants. According to Morrow (2005:252), transferability also involves “the extent to which the reader can generalise the findings of a study to his/her context”. In order to ensure transferability of this research, the researcher had to take into account the need for detail in the communication of research findings. Anney (2014:277) explains that thick descriptions and purposeful sampling are necessary measures that can ensure transferability of research findings because they promote detailed information.

1.9.3 Dependability

Dependability, according to Morrow (2005:252), “deals with the core issue that the way in which a study is conducted should be consistent across time, researchers and analysis techniques”. Dependability thus refers to the stability of findings over time (Anney, 2014:278). In other words, the way the study is conducted should be explicit. In order to achieve dependability of this research, the researcher kept an audit trail (i.e. a detailed

chronology of research activities and processes) (Morrow, 2005:252). The researcher also took into account the importance of in-depth methodological descriptions to help in promoting replication.

1.9.4 Confirmability

Confirmability involves the extent to which research findings show a degree of neutrality which is free of researcher's subjectivity and presuppositions (Sherton, 2004:64). In order to reduce the effect of researcher bias, the researcher used triangulation (i.e. the use of different methods such as semi-structured interviews, member checking and literature study). Different methods ensure a wider range of informants (Sherton, 2004:65) which in turn promotes the integrity of research results. The researcher also admitted and took into account his beliefs and assumptions by writing them down so that he would be able to refer to them whenever possible.

1.9.5 Trust of participants

Building trust is crucial to the production of credible knowledge because it involves the researcher's ability to get his/her participants to talk to him/her with honesty and openness (O'Leary, 2005:66). It implies that if participants feel intimidated or judged in any way they will not open up to give credible information. To establish the trust of participants the researcher observed and committed himself to all ethical considerations such as right of privacy and anonymity.

1.10 ETHICAL CONSIDERATIONS

Concerns that research should be conducted in an ethical manner are paramount to all forms of research and this study was no exception. Ezzy (2002:93) asserts that "ethics are a set of moral principles that aim to prevent researchers from harming those they research". Codes of ethics are therefore paramount because they "ensure the integrity and credibility of the research" (Ezzy, 2002:109). To uphold ethics in this study, the researcher observed the integrity, respect of institutions and participants as foundational values. Cater and Coleman (2006:3) posit that ethical concerns arise mainly during data collection and in the dissemination of findings and they include informed and voluntary agreement to participate, confidentiality of data, subjects and institutions and the safety and privacy of participants as ethical issues.

1.10.1 Informed consent

Obtaining informed consent implies that all possible information concerning the goal of the study, the procedures which will be followed during the research and dangers to which the participants may be exposed will be made known to the participants (Ben-David, 2011:23). The participants were clearly and truthfully informed about the purpose of the interview and the study before consent and assent were sought from them. The participants were also informed of how the outcome of the research would benefit them. The participants signed consent and assent forms where applicable as evidence of their agreement to participate in the interviews and were informed that they could withdraw at any time if they felt it necessary to do so. Consent forms were signed by participants who were above 18 years of age and parents of participants who were below 18 years of age. Assent forms were signed by participants younger than 18 years of age. Since the interviews were carried out at school, permission was sought from The Mpumalanga Department of Education (Nkangala District), The Mpumalanga Department of Education (Emakhazeni Circuit), the principals and the School Governing Bodies of the respective schools.

1.10.2 Right of privacy and confidentiality

Mertens (2010:323) posits that confidentiality means that the privacy of participants will be protected. The participants in this study were assured of their right to privacy and that they would be treated anonymously. The researcher assured participants that no uniquely identifying information would be attached to the data and that no one would be able to trace the data back to them (see Mertens, 2010:323). The participants were informed in writing about the study and that privacy and confidentiality would be observed. The researcher countersigned the consent and assent forms to guarantee the participants' right of privacy.

1.10.3 Protection from harm

Protecting participants from harm includes protecting participants from physical and mental harm (Banyard & Grayson, 2008:458). The researcher guaranteed the participants' protection. No harm was envisaged in this study and if there had been any harmful incidents, professional help would have been called in.

1.11 LIMITATIONS OF THE STUDY

The study was limited to African female adolescent learners who experienced pregnancy to full term, in Belfast, Mpumalanga province. The study did not cover the whole of South Africa since this was not feasible. Financial and time constraints made it necessary to limit the study to Belfast town only. To be precise, the study was limited to 20 African female adolescent learners from three secondary schools in Belfast, Mpumalanga. The focus of data collection was limited to interviews. The individual semi-structured interviews were thus limited to 20 African female adolescent learners who experienced teenage pregnancy. The study focused on the African female adolescents' experiences and perceptions of teenage pregnancy. The aim was not to generalise but to try to understand the phenomenon of teenage pregnancy in depth.

1.12 CLARIFICATION OF CONCEPTS

The definitions of the major concepts are now provided to illustrate their meanings within the contexts they are used in this study.

1.12.1 Perception

Perception is a very powerful force. It determines a person's experience of the world. Perception is how a person views him/herself, how one views the world, how one interacts with him/herself, and how one creates one's reality (Bee, 2009:40). Perception is a way of regarding, understanding, or interpreting something, or a mental impression or an attitude based on what is observed or thought (Creswell, 1998:52). In this study the researcher wanted to ascertain the adolescent female learners' interpretations of teenage pregnancy in a bid to find out how adolescent development influences teenage pregnancy, the effects of teenage pregnancy on adolescent development, the environmental influences of adolescent perceptions of teenage pregnancy and an understanding of the underlying causes and consequences of teenage pregnancy.

1.12.2 Teenage pregnancy

Teenage pregnancy or adolescent pregnancy is defined as pregnancy of a female aged 13 to 19 (UNICEF, 2008:1; Fulghesu, 2017:240). The girl would not have completed her education, would have few marketable skills, would be financially dependent upon her parents or guardians and/or would still live at home. The teenager is often emotionally,

psychologically and cognitively immature (Fulghesu, 2017:240; UNFPA, 2013:6; UNICEF, 2008:1). Mkhwanazi (2010:41) posits that teenage pregnancy “in everyday speech usually refers to women who have not reached legal adulthood, which varies across the world, who become pregnant”. In this study, teenage pregnancy referred to pregnancy by adolescent female learners who fell pregnant during their course of study at primary or secondary school.

1.12.3 Adolescence

Adolescence is the period in development between the onset of puberty and adulthood. It usually begins between 11 and 13 years of age and spans the teenage years, terminating at 18 to early 20 years of age. During this period, the individual undergoes extensive physical, psychological, emotional and personality changes (<http://medicaldictionary.thefreedictionary.com/adolescence>). Ayopo (2009:31) explains that adolescence is a developmental stage during which some transformations occur that include the disengagement from parental ties that have been internalised since infancy, implying that adolescents gain their independence especially from parents. Adolescents also start to experience more sexual impulses than in childhood which include discovering the object of love and the identification for re-adjustment, and the affirmation of identity. It is the period where young people discover who they are. Hauser and Smith (1991:139) explain that “these transformations begin with the onset of puberty, and are concluded when infantile sexual activity has reached its final form”. Adolescence is, therefore, a completion of the process of ego maturation. It is characterised by the conflicts that these transformations bring about and, also, the ensuing crisis resulting from the wish for adult sexual activity and the fear of giving up infantile pleasures (Hauser & Smith, 1991:139). In this study the concepts, ‘teenager’ and ‘adolescent’ were used interchangeably.

1.12.4 African

In this study African refers to Black African female adolescents who belong to the Black race or are non-white and does not include Indian or coloured people. It refers to Black African female adolescents in South Africa, in the continent of Africa.

1.13 RESEARCH PROGRAMME

The researcher's aim was to explore the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga. An outline of the research programme is given below.

1.13.1 Chapter one: Introductory orientation

In the introductory orientation the background to the research, which includes an outline of the problem of teenage pregnancy from a worldwide perspective, South Africa and Belfast, causes and consequences of teenage pregnancy, including the focus and rationale of the study has been presented. The awareness of the problem which includes how the researcher came to be aware of the problem of teenage pregnancy in Belfast, Mpumalanga has been outlined. A preliminary literature review has been given on the contributing factors and conditions that give rise to teenage pregnancy, consequences of teenage pregnancy and the bi-directional influences of adolescent development and teenage pregnancy. The problem statement, sub-questions, the aims of the study, the significance of the study, research methodology to be used, limitations of the study, clarification of concepts used in the research and research programme have also been presented.

1.13.2 Chapter two: Development of adolescent girls and teenage pregnancy

The chapter will highlight and discuss the key theories of adolescent development with special focus on the developmental stages of adolescents which will include physical, cognitive, emotional, psychological, social and moral development. This chapter will also explore literature to find out how adolescent developmental phases influence teenage pregnancy and how teenage pregnancy impacts adolescent development.

1.13.3 Chapter three: Perceptions of teenage pregnancy and its consequences

The chapter will explore the subsystems of the ecosystem enshrined in Bronfenbrenner's ecological model which influence adolescent female learners' perceptions of teenage pregnancy. The main subsystems of the ecosystem that will be explored in this chapter include culture, globalisation, socio-economic status, media and social networks. Literature on how adolescents perceive the experiences of teenage pregnancy will also be explored and discussed. Consequences of teenage pregnancy that affect the ecosystem will be outlined and discussed and they will include personal, family and community consequences.

1.13.4 Chapter four: Research design and methodology

The research design to be implemented in this study will be described and discussed in this chapter. An overview of the exploratory research design and qualitative research approach will be given. The qualitative approach was appropriate for this study since the researcher wanted to gain an in-depth understanding of the African female adolescents' experiences and perceptions of teenage pregnancy. The research paradigm of phenomenology will also be outlined and its appropriateness to this study given. The phenomenological paradigm allows the researcher to understand the experiences and perceptions of teenage pregnancy from the standpoint of the female adolescents. The research problem, the aim of the research, data gathering methods (interviews), the selection of the samples, data analysis and presentation, ethical considerations, credibility and trustworthiness will also be discussed.

1.13.5 Chapter five: Data analysis, interpretation and discussion

The findings and discussion of the empirical investigation will be provided in this chapter. The chapter will present individual interviews conducted with each of the 20 participants in the study. Analysis and discussions of the experiences and perceptions of the 20 participants as well as a comparison with the literature review findings will be undertaken. Emerging key themes and sub-themes will be identified and discussed.

1.13.6 Chapter six: Summary, conclusions and recommendations

This chapter will include the findings emanating from the literature review and the empirical investigation, as well as recommendations. The literature review and empirical investigation focused on the female adolescents' experiences and perceptions of teenage pregnancy. A conclusion of the research, the contribution of the study, the limitations, and matters requiring further research will also be provided in this chapter.

1.14 CONCLUSION

This chapter served as an orientation to the study. It provided the background to the study which highlighted the fact that teenage pregnancy is still a problem that requires further investigation. The high rate of teenage pregnancy not only in South Africa but also around the world signifies a high level of premature and unprotected sexual activity, a situation that cannot continue unabated. The chapter provided a preliminary literature review, which included the influence of adolescent development on teenage pregnancy as well as the impact

of teenage pregnancy on adolescent development. Environmental influences that affect adolescent perceptions of teenage pregnancy such as culture and media were discussed. Consequences of teenage pregnancy were also given in this chapter. Teenage pregnancy, for instance, is both a cause and a consequence of social exclusion. It also impacts negatively on the future aspirations of adolescents, such as its negative effects on the career paths of adolescents. The chapter outlined the research methodology used in this study. The exploratory research design, the qualitative research approach as well as the phenomenological research paradigm was found to be appropriate for the study. The aim of this study was not to generalise but to try to understand the phenomenon of teenage pregnancy in depth. The next chapter will focus on the development of adolescent girls and teenage pregnancy.

CHAPTER TWO

DEVELOPMENT OF ADOLESCENT GIRLS AND TEENAGE PREGNANCY

2.1 INTRODUCTION

Adolescence is commonly used to describe the transition stage between childhood and adulthood. The word adolescence comes from the Latin verb *adolescere*, which means “to grow” or “to grow to maturity” (Arnett, 2013:4; Rice, 1992:78). It is a dynamic, developmental process roughly spanning the years from the onset of the pubertal process to maturity, during which time young people come to terms with themselves and with their unique place in the environment (Herzog, Umama-Taylor, Madden-Dardich & Leonard, 2007:68; Trommsdorf & Chen, 2012:6). Maturity is generally that age, state or condition of life at which a person is considered relatively developed physically, emotionally, socially, intellectually and spiritually (Woolfolk, 2010:26; Rice, 1992:78).

Although the onset of puberty generally signals the beginning of adolescence, as alluded to by McDevitt and Ormrod (2010:114), Rice (1992:78) explains that “the beginning and the end of adolescence are somewhat blurred (not definite and clear), and the time span is not the same for every person”. McGrath (2009:2) explains that adolescence normally begins around 11 or 12 years of age and lasts until the late teenage years or early twenties. Many researchers and developmental specialists use the age span 10 to 24 years of age as a working definition of adolescence (Rutherford, 2011:39; Rathus, 2006:11). The variations associated with adolescence are mainly attributed to the differences in genetics (inherited genes) and environmental conditions of the adolescent (Woolfolk, 2010:27).

Cultures may differ in their idea of maturity and adulthood but there are some common milestones characterising adolescence that are interwoven throughout various cultures and ethnic groups (Owens, 2002:492). Such milestones, according to Owens (2002:492), include, inter alia, dependence versus independence. In other words, adolescents as emerging adults seek to become more independent, especially from their parents. Another important milestone of adolescence across cultures is young people’s desire for exploration which in most cases is prompted by their search for identity (Woolfolk, 2010:86). Erikson sees adolescence as a period of moratorium, a ‘time out’ period in which the adolescent experiments with a variety of identities without having to assume the responsibility for the consequences of any particular one (Woolfolk, 2010:86; McDevitt & Ormrod, 2010:449). In this process,

adolescents especially examine many options which are available to them such as career and intimate relationship options (Rathus, 2006:244; McDevitt & Omrod, 2010:114).

Trommsdorff and Chen (2012:8) contend that the significant changes in, for instance, physical, cognitive and psychosocial development during adolescence can influence adolescent female learners' perceptions of teenage pregnancy. It is true that throughout history teenagers were more likely than at any other developmental periods to engage in some form of risk behaviours such as early sexual intimacy which can result in pregnancy. The majority of teenage conceptions are purportedly unintended because teenage pregnancies generally occur as a result of contraceptive failure, a sense of personal invulnerability and in most cases impulsive behaviour fuelled by such factors as alcohol intake and improper responses to the demands of puberty (Balter & Tamis-Lemonda, 2006:386; Rutherford, 2011:387; Allen & Dowling, 1998:23). It means that adolescent developmental transitions alter the adolescents' perceptions, may cloud their judgments and thus in turn can influence them to engage in risk-taking behaviours such as early sexual activities that can lead to pregnancy.

Duncan (2007:307) asserts that "public discourse in South Africa and the rest of the world sees teenage motherhood as a pernicious social problem where mothers, their children and society in general will suffer". Adolescent pregnancy affects the emotional, social, physical and economic well-being of the teenage parent and child. Challenges of motherhood are generic (common among women) but become severe in teenage mothers mainly because of immaturity (Vincent, 2012:46). Teenage pregnancies are mostly unwanted therefore in most cases they are stressful, thus bringing a lot of emotional strain to the adolescent. The state of adolescent pregnancy often leads to bad marriages, severe marital problems and divorce which in turn may cause psychological distress, loss of self-esteem and further self-destructive behaviours such as drug abuse (Vincent, 2012:46). Socially, the adolescent may also not interact freely with others especially when the pregnancy goes against family and societal expectations. The discrimination faced by teenage mothers, especially if they receive negative responses from people close to them causes stress and isolation.

Most teenage pregnancies are also associated with adverse maternal and neonatal outcomes such as pregnancy inclined hypertension and prematurity respectively which impinges on physical development (Zembar & Blume, 2009:415; Allen & Dowling, 1998:200). Teenage pregnancy can thus affect the physical development of both the adolescent mother and her

infant. Another primary area in which teenage parents' futures may suffer is educational attainment especially when the adolescent fails to cope with the demands of school and parenthood simultaneously. When pregnancy causes a teenager to drop out of school, it inhibits the career aspirations of the adolescent and in most cases it results in unemployment, thus leading to poverty.

Teenage pregnancy poses a significant financial burden on society at large, especially if one considers the financial implications of health care for the mother and child, for example, government expenditures in the form of child support grants (Weiss & Correia, 2012:6). Early child bearing is thus one of the strongest factors associated with poverty and welfare dependency (Meece & Daniels, 2008:117).

Adolescents have more responsibility for decision making in confusing and uncertain contexts and are confronted with a multitude of risks (Woolfolk, 2010:78) such as teenage pregnancy. An understanding of the phenomenon of teenage pregnancy may help in mapping strategies for reducing the prevalence of teenage pregnancy. This chapter therefore focuses on the development of adolescent girls, in a bid to explore how their perceptions develop. The chapter addresses physical, emotional, social, cognitive and moral development to explore how adolescent development influences a teenager's likelihood of falling pregnant as well as how teenage pregnancy impacts adolescent development.

2.2 PHYSICAL DEVELOPMENT

2.2.1 An overview of physical development

Physical development is how a human body grows and develops over a period of time. McDevitt and Ormrod (2010:110) contend that physical development takes place through changes in size, bodily proportions and neurological structures (the structure that deals with the nervous system) throughout childhood and adolescence. Woolfolk (2010:26) also asserts that physical development includes changes in body structure and function, implying that growing up entails getting bigger, stronger and more coordinated over time.

Physical development is the outcome of nature and nurture which means that it is determined by both biology and environmental circumstances. The course of physical development thus represents a complex interplay between biological and environmental influences (Zembar & Blume, 2009:408). Human genes (nature), for instance, tell a person's body to complete a particular sequence of changes such as the sequence of changes in puberty. Individual

genotypes set limits for stature, shape and the tempo of growth (Zembar & Blume, 2009:130; Lippman, 1993:101). At the same time, environmental factors (nurture), such as nutrition, affectionate relationships, and opportunities for physical activity and sleep, promote growth (McDevitt & Ormrod, 2010:98; Rutherford, 2011:28). Whilst it is true that adolescents have common physical growth patterns, the different environmental conditions, especially the contexts in which they are raised, determine their rate of physical growth as well as their behaviours. Bad nutrition, for example, can be a cause of many diseases that can retard physical growth. In turn, retarded growth can affect the behaviour patterns of an individual especially when it negatively affects the normal functioning of the body such as body coordination. Nature and nurture are therefore closely intertwined during physical development.

Physical development entails brain development. Rutherford (2011:97) explains the importance of the brain by asserting that all psychological processes also emanate from the brain. Whether one is studying emotions, behaviour, cognition, attitudes, beliefs, attachment or language, one is studying the processing of the brain (Rutherford, 2011:97). The brain is thus an important organ that allows a human being to be able to interact with the world in a more meaningful way but, like any organ of the body, it develops over time. Hence an adolescent may not be cognitively mature enough to effectively deal with sexual challenges such as being able to analyse the long-term consequences of early pregnancy.

Rapid physical developmental changes occur during adolescence. The onset of physical changes that results in puberty marks the beginning of the adolescent period (McDevitt & Ormrod, 2010:162; Rice, 1992:118). Arnett (2013:34) explains that, after developing gradually and steadily during childhood, at puberty the body undergoes a biological revolution that dramatically changes the adolescent's anatomy, physiology and physical appearance. Rutherford (2011:398) contends that puberty is a coordinated set of changes that lead to, for instance, sexual maturation and entry into the sexually reproductive years. Ushered in by a cascade of hormones, puberty involves a series of biological changes that lead to reproductive maturity such as breast development in girls and a heightened desire for people of the opposite sex. These changes, according to Rutherford (2011:398), include menarche in girls (the onset of menstruation) and spermarche in boys (the onset of ejaculation). According to Goelman, Pivik and Guhn (2011:22), the process of puberty begins anywhere between the ages of 8 and 11 years of age for girls and takes an average of between four and five years to complete. The implication is that puberty is a transition that takes time

to complete and during that transition both boys and girls face sexual challenges. Sexual feelings increase in intensity, reflecting the greater amount of sex hormones circulating in the body for both females and males (Woolfolk, 2010:78). Thus during adolescence, the lives of males and females often involve sexual acts due to heightened sexual urges and desires (Zembar & Blume, 2009:129; Kail & Cavanaugh, 2007:311; Santrock, 2008:186).

In view of Freud's psychodynamic theory, the genital stage of psychosexual development begins with puberty, the period of " Sturm und Drang" (extreme stress and strain) (Meece & Daniels, 2008:36; Max, 1993:81). Freud explains that young people continually find themselves torn by sexual and aggressive impulses on one hand, and acceptable societal norms on the other; hence adolescence is fraught with internal struggle (Parker & Aggleton, 2007:27; Owens, 2002:14-26). According to Freud's psychosexual stages of development, it is during the genital stage that all the previous elements of psychosexual development, namely, oral, anal and especially phallic stages, are brought back into play (McDevitt & Ormrod, 2010:13). Freud viewed the pre-adolescent latency period as a time when the child develops a balance between the ego and id but adolescence can negatively affect that balance (Max, 1993:64).

In Freudian terms, the id is the only structure with which we are born that incorporates all of our basic biological drives and energies (Woolfolk, 2010:16; Gouws & Kruger, 1995:76), thus it is the primary force in human behaviour. The functioning of the id, which is the site of the drives, is primitive in that it is based on the pleasure principle (McDevitt & Ormrod, 2010:17). McLeod (2008:2), however, explains that during the first few years of life the self, or ego, develops. The function of the ego is to find safe and appropriate ways for the id to express itself. Through the ego, a child finds ways to get what he or she needs within the boundaries of what is socially acceptable. In other words, gratifying needs through constructive and socially appropriate ways. After the initial struggle between the id and ego, the child learns to delay gratification in response to external demands, particularly norms of parents. However, according to Freud, upon entering the genital phase of adolescence, the adolescent is bombarded with instinctual impulses that disrupt the balance between the id and the ego (Parker & Aggleton, 2007:27; Adams, 2000:16-19). The ego is actually torn between the strong impulses of the id and the restrictions of the superego.

The superego, according to Freud's psychosexual theory, is the moral branch of personality (Meece & Daniels, 2008:36; Rutherford, 2011:398). The superego takes into account whether

something is right or wrong. Freud's superego consists of nothing but the moral teachings of the culture in which people are raised (Allpsych, 2011:1; McLeod, 2008:2; Recapp, 2009:2). Freud believes that the three structures, namely, the id, ego and superego, are in conflict most of the time. Hence adolescence, with its rapid physical changes, can become a time of tremendous stress and turmoil (McLeod, 2008:2; Recapp, 2009:3; Allpsych, 2011:2).

The biological and physiological changes of puberty have psychosocial implications for adolescents (Zembar & Blume, 2009:122; Kail & Cavanaugh, 2007:311). This means that puberty can influence the way adolescents relate to other people and may also affect their self-perceptions. Meece and Daniels (2008:105) thus assert that puberty involves more than just physical changes. It is also associated with a number of psychosocial constructs such as body image, self-concept, family relationships, cognitive abilities, moods and relations with the opposite sex. The implication is that although there is a sudden and dramatic increase in the release of sex hormones at puberty, resulting in the development of certain sexual characteristics, of greater importance is the fact that significant sexual thought and behaviour accompany this event. Balter and Tamis-LeMonda (2006:385) explain that pubertal changes can have direct effects on behaviour such as a heightened desire for persons of the opposite sex.

Body image, for instance, is one of the major psychological effects of puberty that can affect adolescent behaviour. Body image is a subjective picture or view of one's own physical appearance established both by self-observation and by noting the reactions of others (Rice, 1992:148; Lippman, 1993:99). A person can develop a positive or negative body image. A negative body image is when a person has a distorted perception of one's shape (Lippman, 1993:99). A person feels ashamed, self-conscious and anxious about one's body. A person with a negative body image can be convinced that only other people are attractive (Rice, 1992:149). A positive body image is when one celebrates and appreciates one's natural body shape. How an adolescent responds to his/her body image is thus paramount since it determines the behaviour of the adolescent.

Physical development can also have social implications, especially when it affects the way an adolescent interacts with other people. Meece and Daniels (2008:64) assert that physical changes at puberty can lead to changes in the child's social relationships with peers, parents and teachers, although the changes in social relationships are also influenced by social conditions and by cultural expectations. Sigelman and Rider (2012:36) posit that the physical

changes of early adolescence, for instance, often lead to new responses from other people, especially those of the opposite sex. Female adolescents, for instance, may no longer be seen by some men as just children but as sexual beings to be targeted. When adolescents are inappropriately targeted by some people of the opposite sex, they may become more prone to early sexual acts. The development of sexual characteristics during puberty also changes the way an adolescent relates to people of the opposite sex. The adolescent girl may develop more interest in boys and vice versa.

The varied timing of pubertal development also creates different psychosocial dilemmas or challenges (Sigelman & Rider, 2012:159). Research has shown the dynamic effects of early or late puberty on the behaviour of both boys and girls in the spheres of social, emotional and intellectual development. Max (1993:19) posits that early maturing girls, for instance, may be particularly vulnerable to adjustment difficulties in adolescence. The main reason for adjustment challenges is that early maturing girls look quite mature physically and are expected by society to behave as such and yet they are cognitively and emotionally immature. Because of their adjustment difficulties, early maturing girls are more likely to engage in deviant behaviour and to have problems at school (Max, 1993:20). “Adolescent females who develop sexual characteristics at an earlier age tend to hang out with an older crowd and attract older males. However, they lack the social skills and maturity to counteract the sexual advances of these older males” (Rutherford, 2011:387). Early maturing girls may request earlier independence from their parents, thereby increasing their chances of dating earlier than late maturing girls (Rutherford, 2011:387; Rathus, 2006:8; Santrock, 2008:185). The unfortunate situation is that, as a result of their social and cognitive immaturity, early maturing girls may engage in sexual activities without recognising the possible long-term effects of such behaviours on their development.

Arnett (2013:45) contends that there is a downward secular trend in the age of menarche, suggesting that many girls are reaching puberty at earlier ages. The implication is that adolescence starts earlier than before, so the chances of early sexual activities are also higher. Mpanza and Nzima (2010: 431) concur by asserting that teenage pregnancies are increasing in number each year partly because of the age at which sexual activity commences.

There has been a steady trend toward earlier puberty in industrialised nations during the last hundred years, with better nutrition probably being the primary reason for the trend (McDevitt & Ormrod, 2010:165). Industrialisation is associated with the improvement of

employment opportunities; hence better socio-economic conditions are created for some people. It means that people may then be able to get better food which promotes physical development that includes earlier onset of puberty. The implication is that the adolescent period is starting much earlier than before, suggesting that the adolescent period is even longer, thus making adolescents more susceptible to earlier sexual activities. There is no proof that earlier puberty means earlier cognitive development, implying that puberty can start earlier when mental capacities of the adolescent are still lagging behind. An adolescent may thus not be able to interpret the implications of early sexual practices fully. It implies that besides the onset of hormonal changes in puberty, a child's cognitive and emotional state can promote negative behaviours such as early sexual acts. It also shows that significant others in families and schools, such as parents and teachers, are paramount to guide the adolescents to go through this transition in socially acceptable ways.

2.2.2 Physical development and its influence on teenage pregnancy

The onset of physical changes that results in puberty marks the beginning of the adolescent period (McDevitt & Ormrod, 2010:162) and such changes impinge on the female adolescent's perceptions of teenage pregnancy. Zembler and Blume (2009:130) contend that pubertal maturation has both direct and indirect effects on how adolescents think, feel and act. Puberty involves a dramatic increase of sex hormones, resulting in the development of certain sex-specific characteristics such as a heightened interest in the opposite sex (Woolfolk, 2010:78; McDevitt & Ormrod, 2010:114). The sexual urges and desires are heightened in adolescence due to hormonal increases at puberty, thus adolescent girls become more susceptible to early sexual activities that may result in teenage pregnancy. Woolfolk (2010:78) contends that puberty marks the beginning of sexual maturity which is the ability to reproduce. Thus, during adolescence, the lives of males and females become wrapped in sexuality (Santrock, 2008:186).

Bodily changes in shape and size of a female adolescent may attract attention from male sexual perverts. Woolfolk (2010:78) explains that physical development is public, in other words everyone can see how tall, short, heavy, muscular or beautiful a person is or becomes, hence it may attract public attention. Adolescence, according to McDevitt and Ormrod (2010:114), is marked not only by the maturation of sex-specific characteristics but also by a growth spurt, a rapid increase in height and weight which people can see, admire or may respond to in a negative or positive way. Adolescent girls, for instance, may no longer be

seen as just children, but as sexual beings to be protected or targeted (Sigelman & Rider, 2012:36). Protection of adolescents can be done by significant others such as parents or teachers by helping them to embrace the changes in a healthy way. Adolescent females may also elicit inappropriate responses from people. When adolescent girls are, for instance, targeted by people of the opposite sex such as potential boyfriends, they become more prone to early sexual activities that can possibly result in early pregnancy.

Studies of endocrine development in adolescence demonstrate the very strong correlation between increasing sex steroid levels and somatic maturation (Sigelman & Rider, 2012:36). It implies that there is a strong link between an increase in sex hormones and physical growth. It means that hormonal increases in adolescence happen at the same time that visible signs of physical growth are also taking shape. A combination of heightened sexual desires and growth spurts in adolescence can thus be a catalyst for inappropriate sexual activities which, in most cases, lead to unwanted pregnancies.

Adolescents' brains are not fully developed for cognitive maturity therefore they cannot see consequences of risk-taking behaviours such as early pregnancy before it actually happens. According to Woolfolk (2010:116), the teenage changing brain can provoke young people to try new things such as sexual activities and to affiliate with like-minded peers. Although it will be discussed in more detail in the next section on cognitive development, teenage brains can cause young people to develop a personal fable. Woolfolk (2010:116) explains that a personal fable involves content where teenagers tend to imagine themselves as unique, invincible or invulnerable members of the human race. Their personal fable may influence them to engage in risky behaviours such as early sexual acts that can lead to early pregnancy. Such risks are heightened in adolescents because their personal fables convince them that pregnancy will not happen to them, but to others, since they are unique and invulnerable.

Hormones, which are produced in larger amounts in puberty, are capable of triggering certain behaviours in adolescents. Adolescent girls, for instance, may not only respond to people of the opposite sex but also to peers who might have different viewpoints about pregnancy. Some adolescent girls have a positive view of becoming pregnant depending on the social circumstances and the influence of their peers. Psychologists argue that biological or hormonal processes can largely shape the way people reason and make decisions regardless of past experiences or cognition (Allen & Dowling, 1998:208; McDevitt & Ormrod,

2010:164). It means that, despite an adolescent's level of cognitive development, hormonal changes alone can be so strong that they can affect the adolescent's perceptions of pregnancy.

Freud proposes that human behaviour is largely governed by motives and drives that are internal and unconscious (Kail & Cavanaugh, 2007:11). Freud (1933) emphasises that sexual and aggressive urges are inborn. From birth a child is born with sexual urges but the values in the family and society affect how children control and express those instinctual urges (McDevitt & Ormrod, 2010:17). When the sexual urges are not properly controlled, then such an adolescent is likely to engage in early sexual acts that can result in pregnancy. In view of Freud's psychoanalytic theory, adolescents can experience early pregnancies due to psychological pressure emanating from childhood experiences of the adolescent. It is often instability of the mind and lack of appropriate values which cause adolescents to fail to understand some of the consequences of their behaviours, such as early dating, that can result in early pregnancy.

Freud also postulated that the four stages of psychosexual development (oral, anal, phallic and genital) are the foundations of adult personality. According to Freud, there are forces mainly in the unconscious mind of people that intervene between the past and present in order to influence sexual behaviour. Our behaviour, according to Freud, is not the result of current economic or social situations or of the use of reason, but more a result of psychosexual drives (Rathus, 2006:7). Freud explains that biological forces such as hormones determine sexual behaviour. McDevitt and Ormrod (2010:17) explain that, according to Freud, universally, children struggle with sexual feelings and if not properly controlled then such children may fall pregnant.

Another point of interest according to Freud's psychoanalytic theory is that development is primarily unconscious, beyond awareness (Parker & Aggleton, 2007:27). According to Rathus (2006:7), Freud believed that most of the human mind lies beneath consciousness, like an iceberg. In other words, Freud theorised that because of their childhood experiences, people are vaguely aware of the ideas and impulses that actually occupy the greater depths of their minds (Rathus, 2006:7). The unconscious, according to Cherry (2014a:1), includes all of the things outside of our awareness such as all of the wishes, desires, hopes, urges and memories that lie outside of awareness yet continue to influence behaviour. It implies that adolescent females can develop certain behaviours without being aware of them but in the end can lead to early pregnancy.

Freud also postulated that as a child develops in psychosexual stages he/she can be fixated at a specific stage, thus hampering development at later stages (Woolfolk, 2010:16; Mcevitt & Ormrod, 2010:13). In other words, the fixations in early life are part of the unconscious world of a person. According to Freud (1933:14), in the phallic stage, for instance, children learn to understand and enjoy their bodies through manipulating their genitals. The later ability to interact sexually with other persons depends on the way their parents reacted to their early masturbation (Woolfolk, 2010:16; Dacey, 1986:13). The implication is that adolescent behaviours and their perceptions of teenage pregnancy may be influenced by how they were fixated at some of the psychosexual stages especially the phallic stage which, according to Freud's theory, re-awakens in the genital stage (McDevitt & Ormrod, 2010:13). If adolescents were fixated at the phallic stage, though it may be in the unconscious, they are likely to exhibit more interest in sexual activities such as early dating which in turn can lead them to pregnancy.

Female adolescent perceptions of teenage pregnancy can be influenced by their earlier experiences in life as well as lack of proper parental guidance in adolescence. The genital stage, for instance, coincides with adolescence therefore if the female adolescent was not properly guided then she is likely to engage in sexual acts that can result in early pregnancy. Research shows that lack of communication between the female adolescent and her mother is often a causal factor in failure to use birth control (Cocca, 2006:67; Allen-Meares & Shapiro, 1989:34; Roles, 1990:31). The way children are brought up influences their behaviour in later stages. It means that failure of a mother for instance, to communicate with the female adolescent about birth control can make the female adolescent more susceptible to early pregnancy.

According to Sigmund Freud, the genital stage coincides with puberty primarily because there is a heightened readiness for genital stimulation. At this time the adolescent experiences a re-awakening of sexual interests that were relatively dormant throughout the middle childhood period (McDevitt & Ormrod, 2010:13). The implication is that the sexual urge is naturally more pronounced at the genital stage and if such adolescents are not properly guided to embrace the changes in appropriate ways then they are more likely to fall pregnant.

Cherry (2014a:1) explains that, according to Freud's psychoanalytic theory, teenagers may get pregnant because they experience intense emotional conflicts during the genital stage of psychosexual development. Freud felt that, just as there is physical energy in our bodies,

there is psychic energy that motivates our choices about issues such as contraception and sexual activities. Cherry (2014a:1) posits that psychic energy is the psychological energy that is generated by the libido (sexual urges) and acts upon our psychological entities such as our thoughts. Libido, according to Freud, is the instinct energy or force that influences our behaviour (Cherry, 2014a:1). Adolescent females' perceptions can be influenced by the psychic energy which is channelled and redirected throughout our system through the mechanism of the libido or sexual desires (Cherry, 2014a:1); hence the choices of sexual acts by the adolescent can be irrational or impulsive. In the Freudian view adolescents especially are always at risk of being instinctually impulsive (overreacting, indulging in prohibited or sexually unacceptable sexual activities) (Pressley & McCormick, 2007:137). When an adolescent engages in sexual acts with an irrational mind, without thinking objectively, then she may not think of protection and thus may fall pregnant. This may explain the reason why most adolescent pregnancies are unwanted but continue to increase in many communities.

With reference to Freud's views about the id, ego and superego, teenagers who engage in risky sex may not have strong enough egos (to analyse the consequences) or superegos (to arouse guilt) to keep their selfish ids in check (Sigelman & Rider, 2012:58). Rathus (2006:8) posits that the parts of the human personality (the id, ego and superego) are intensely intertwined and often at war with one another because they all try to prevail. Adolescent girls who fall pregnant may be overpowered by the sexual urges emanating from the instinctual drives of the id. The irrational id which operates on the pleasure principle, according to Freud, can overpower the rational influence of the superego, hence the adolescent may engage in early sexual acts that can result in pregnancy (Parker & Aggleton, 2007:27; Woolfolk, 2010:16). Pressley and McCormick (2007:137) emphasise that the risk of the id overwhelming the ego is always present. Anna Freud believed that at puberty the force of the id becomes even greater, and the delicate balance of control is in most cases destroyed (Recapp, 2009:1). The implication is that when the id exerts more force during puberty, as Freud (1933:14) believes, then the adolescent stage is really the stage which requires more guidance from significant others in order to control sexual behaviour.

The adolescent period is starting much earlier than before, suggesting that the adolescent period is even longer thus making the adolescent more susceptible to teenage pregnancy than in the past. There has been a steady trend towards earlier puberty in industrialised nations during the last hundred years, with better nutrition probably being the primary reason for the trend (McDevitt & Ormrod, 2010:165). Similarly, Santrock (2008:185) asserts that early

maturing girls request earlier independence from their parents, normally have older friends, and their bodies are likely to elicit earlier responses from males leading to earlier dating and earlier sexual experiences. By so doing, early maturing girls have higher risks of falling pregnant. However late, early and normal maturing adolescents can all fall pregnant due to other circumstances that will be discussed in the next chapter such as the influences of culture, globalisation and media.

2.2.3 The effects of teenage pregnancy on physical development

Pregnancy brings its own set of physical and emotional changes which are more severe in adolescent pregnancy. Adolescence is a very tender age, and hence adolescents may lack the physical, as well as psychological maturity required for conceiving children, thus normal adolescent physical development is disturbed (Bryant, 2006:133). Allen and Dowling (1998:21) posit that a pregnant adolescent's body will change physically and her moods will fluctuate. Pregnancy and growth together will also put extra demands for nutrients on a pregnant teenager's system, more so because the teenager's body is developing at the same time that the foetus is developing. Allen and Dowling (1998:22), commenting on the effects of teenage pregnancy on physical development, posit that pregnancy in the very young is generally considered to be a high risk event because of its additional demands on a body which has still to grow. Physiologically (biologically) the adjustments of pregnancy are superimposed on those of pubescence. If a body fails to meet the biological demands of pregnancy such as a mature uterus that accommodates the developing foetus, it means that the body's health is adversely affected.

Vincent (2012:3) posits that "among the primary goals of most obstetricians is the continued health of the mother before, during and after gestation, but pregnancy in the exceedingly young patient frequently fails to achieve this objective". Teenage pregnancy is associated with adverse health outcomes such as maternal complications which in turn affect normal physical development. Complications mentioned in literature in teenage pregnancy include premature labour, low birth weight, increased neonatal mortality, iron deficiency, anaemia, toxemia, prolonged labour, cephalopelvic disproportion, vaginal infection and vaginal lacerations all of which interrupt normal physical development (Chen, Wu Wen, Fleming, Demissie, Rhoads, Walker, 2007:368; Allen & Dowling, 1998:22). It implies that pregnancy in the very young mother affects not only the young mother's health but also the unborn baby's physical development and health. Bryant (2006:133) reveals that neonatal death rates

are three times higher among adolescent mothers than adult mothers. Teenage pregnancy often results from a new and short term relationship and, hence, a relatively short exposure time to the male partner's semen, and it is that reduced exposure which is linked to an increased risk of eclampsia and the need to expedite premature delivery (Allen & Dowling, 1998: 21). According to WebMD (2014:1) preeclampsia and eclampsia are diseases of pregnancy that involve the development or worsening of high blood pressure during the second half of pregnancy. The eclampsia includes symptoms of preeclampsia along with seizures. It is dangerous during pregnancy because it may interfere with the placenta's ability to deliver oxygen and nutrition to the foetus (Allen & Dowling, 1998:21).

Vincent (2012:3), in explaining the adverse effects of teenage pregnancy on physical development, posits that immaturity of the pelvic bones may also cause obstructed labour in very young girls. According to Fantu, Segni and Alemseged (2010:145), obstructed labour is an important cause of maternal death in communities in which childhood undernutrition and early marriage is common. Obstructed labour also causes significant morbidity of female adolescents mainly due to infection and haemorrhage. Haemorrhage represents excessive bleeding of the female reproductive system. Such bleeding could be visible or external, namely bleeding from the vagina, or it could be internal into the pelvic cavity (Fantu et al., 2010:145).

Allen and Dowling (1998:20) posit that adolescent mothers are at the greatest risk if pregnancy occurs before cessation of linear growth. Linear growth is about four years after menarche or at about seventeen years of age and completion of linear growth is an achievement of gynaecologic maturity. Poor obstetrical performance in most adolescents is thus mainly related to the physical immaturity of the adolescent. The worrying factor is the number of teenagers who fall pregnant before completion of linear growth, that is, before seventeen years of age. By implication, in this study most of the adolescent females who fall pregnant are at high risk of health-related complications which impinge on normal physical development mainly because of their immaturity.

The postnatal body shape is also an area of concern to a teenage mother. According to Allen and Dowling's (1998:150) findings, a return to pre-pregnant body shape concerns many teenagers. Most adolescents are desperate to reclaim and reinscribe their bodies as not pregnant. This is more so because most adolescent females are susceptible to media, fashion and social pressures to conform to a stereotype of femininity which valorises thinness over

most other attributes (Allen & Dowling, 1998:150). In other words, most adolescents are very particular about their body weight even after pregnancy. Max (1993:55) concurs by asserting that attractiveness is more important to adolescent girls than to boys. The implication is that teenage pregnancy impacts normal adolescent physical development by promoting gestational weight retention common among postpartum women. Thus most adolescents fail to come to terms with a body weight and body image which they generally abhorred. If adolescent pregnancy promotes an unhealthy body of both mother and child and also promotes a body shape that is unfavourable to the young mother, then one can safely surmise that teenage pregnancy affects normal physical development.

2.3 COGNITIVE DEVELOPMENT

2.3.1 An overview of cognitive development

Cognitive development can be defined as the development of a person's mental capacity to engage in thinking, reasoning, interpretation, understanding, knowledge acquisition, remembering, organising information, analysis and problem solving (McDevitt & Ormrod, 2010:191; Arnett, 2013:61; Woolfolk, 2010:26). Rathus (2006:184) contends that cognitive development focuses on how children develop mental representations of the world. Cognitive development entails the gradual orderly changes by which mental processes become more complex. In other words, it is the development of cognition which, according to McDevitt and Ormrod (2010:191), encompasses all the mental activities in which a human being engages, including perception, categorisation, understanding, memory, logical reasoning and problem solving. The processes of cognition evolve and change in many ways over the course of childhood but, like other forms of development, it is in adolescence that cognitive changes become more differentiated (Arnett, 2013:60; Piaget, 1972:2). Zembar and Blume (2009:415) explain that adolescence is characterised by a qualitative change in logical understanding involving hypothetical reasoning, probabilistic thinking and complex information processing, such as higher order problem solving skills. The dramatic changes that occur in cognitive development during adolescence thus affect all aspects of their lives including their sexual behaviour (Arnett, 2013:60).

Piaget's cognitive and Vygotsky's sociocultural theories outline how adolescents' cognitive changes take place. Piaget's theory of cognitive development postulates that adolescents go about making sense of their world through the processes of organisation and adaptation (Piaget, 1972:10; Piaget, 1970:25). Woolfolk (2010:32) asserts that organisation entails

ongoing processes of arranging information and experiences into mental systems or categories. Louw and Louw (2007:298) also explain that organisation is the tendency of cognitive processes to become not only complex but also more systematic and coherent. In Piagetian view, people are born with a tendency to organise their thinking processes into psychological structures called schemes (Bergin & Bergin, 2012:96). Woolfolk (2010:33) contends that schemes are mental systems or categories of perception and experience. Schemes are thus simple structures that are continually combined and coordinated to become more sophisticated and more effective.

Piaget also postulated that people inherit the tendency to adapt to their environment (Arnett, 2013:61). Adaptation occurs through complementary processes of assimilation and accommodation. Assimilation takes place when people use their existing schemes to make sense of events in the world. Trying to understand something new by fitting it into what we already know is assimilation (Woolfolk, 2010:33; Slavin, 2009:35; McDevitt & Ormrod, 2010:194; Rutherford, 2011:33). Assimilation thus involves incorporating experiences into the existing mental structures (Bergin & Bergin, 2012:96; Daniels & Edwards, 2004:136).

Accommodation primarily involves altering existing schemes or creating new ones in response to new information (Woolfolk, 2010:33; McDevitt & Ormrod, 2010:194). Accommodation is essentially the tendency to modify conceptions and refine experiences. It is therefore more of a qualitative change since it is about modifying existing schemes and acquiring new knowledge. According to Woolfolk (2010:33), if data cannot fit any existing schemes (assimilation), then more appropriate structures must be developed (accommodation). We adjust our thinking to fit the new information (accommodation) instead of adjusting the information to fit our thinking (assimilation). Both processes of assimilation and accommodation are thus required most of the time to enable adolescents to adapt to the environment. Pregnancy as a new concept will thus require accommodation of a new idea not known to the person.

Piaget emphasised that cognitive development goes through four major stages namely sensorimotor, pre-operational, concrete operational and formal operational stages. The formal operational stage is the stage most relevant to cognitive development in adolescence (Arnett, 2013:61). Having the ability to handle problems of seriation, classification and conservation, children from about 11 or 12 years old begin to develop a coherent system of formal logic (Slavin, 2009:35). The most important change that occurs during the formal operations stage

is that adolescents' thinking shifts from the real to the possible, that is, from what is to what might be (Woolfolk, 2010:34). It means that adolescents can now think more in abstract terms. Older elementary school children can reason logically but only about people, places and things that are tangible and concrete (Slavin, 2009:35). In the formal operations stage adolescents can think about things they have never experienced, for example, sexual acts (McDevitt & Ormrod, 2010:198; Woolfolk, 2010:38).

Development from concrete operational thinking to formal operational thinking is marked by movement from reality to possibility (Slavin, 2009:35; McDevitt & Ormrod, 2010:198; Santrock, 2008:39). The implication is that there are many possibilities that come into the minds of adolescents to experiment with. Thinking for an adolescent in the formal operations stage is more hypothetical, multidimensional and future oriented, thus it is more diversified and all inclusive (Santrock, 2008:39). Woolfolk (2010:34) indicates that hypothetico-deductive reasoning is a formal operations problem solving strategy in which an adolescent may begin by identifying all factors that might affect a problem and then deduces and systematically evaluates specific solutions. Formal operations, according to Woolfolk (2010:38), also involve inductive reasoning or using specific observations to identify general principles. The adolescent can thus imagine all that might be, from the obvious to the very subtle (Owens, 2002:507; Adams, 2000:23).

Adolescence is therefore a great transition in which thinking patterns involve great changes.

Continuing brain development, increasing brain weight and refinement of the synaptic connections in the corpus callosum (which connects and coordinates the two hemispheres of the brain) make many of the adolescents' newly acquired cognitive skills possible such as coming up with more possibilities in life such as career options (Owens, 2002:532).

Santrock (2008:40), however, found that many adolescents are not fully-fledged formal operational thinkers, hence they mostly encounter intellectual challenges in decision making that affect their sexual activities. The female adolescent may for instance find challenges in decision making that can help them to avoid pregnancy such as contraception.

Vygotsky's (1978:57) sociocultural theory places more emphasis on the role of learning and language in cognitive development. Vygotsky's major premise is that an adolescent's internal processes have their roots in interactions with others (Vygotsky, 1978:57; Woolfolk, 2010:18; McDevitt & Ormrod, 2010:209). The internal processes include mental processes such as problem solving. Woolfolk (2010:42) asserts that in Vygotskian view social interactions can

create adolescents' cognitive structures and thinking processes. During interactions with more knowledgeable people such as parents or teachers an adolescent can gain knowledge and skills in problem solving. According to Vygotsky, cognitive development results from the dialectical process, which is a process of shared problem-solving (Rutherford, 2011:14). The dialectical process includes conversations between an adolescent and an adult or a knowledgeable other in problem solving. Rutherford (2011:14) explains that in this process an adult and an adolescent can repeatedly work through a problem or task together. Over time the adolescent takes more and more responsibility for executing the task. Eventually the adolescent internalises the knowledge and the way of thinking modelled by the adult (Rutherford, 2011:14; Rathus, 2006: 26).

It means that an adolescent depends on other people who are more knowledgeable to acquire cognitive skills. In turn, the adolescent becomes independent as he/she internalises knowledge acquired during interactions with others. From a Vygotskian point of view, interaction is therefore key because it is the basis on which adolescents internalise knowledge. For example, by listening to other students, students can learn how to ask questions when they are unsure of the meaning of a concept and in that process they develop mentally (Sternberg & Williams, 2010:57). The sociocultural theory proposed by Vygotsky thus emphasises that adolescents and adults are social beings who are greatly influenced by the people and cultures in which they live. Rathus (2006:26) asserts that we may be affected by other factors such as the psychological past or biochemical forces such as hormones, but we are also affected by the customs, traditions, languages and heritages of the societies in which we live. The female adolescents' perceptions of teenage pregnancy can be influenced by their sociocultural background. In other words, according to Vygotsky, society and culture promote adolescent cognitive growth (McDevitt & Ormrod, 2010:209) which in turn affects their perceptions of teenage pregnancy.

2.3.2 The influence of cognitive development on teenage pregnancy

The changes that occur in cognitive development during adolescence affect all aspects of their lives, including their sexual acts. Arnett (2013:61) emphasises that adolescents all over the world confront intellectual challenges as part of their daily lives, thus they need proper guidance, especially to go through their sexual challenges. The human brain is not fully mature until adulthood, hence adolescents face some limitations in decision making such as making rational decisions about safe sexual acts. Many adolescents are not fully-fledged

formal operational thinkers and as a result they may not be able to see far in the future like, for instance, being able to verbalise the real consequences of their sexual behaviour (Santrock, 2008:46). The brain's cognitive control system which helps one to refrain from risky behaviour matures more gradually (Wood, 2012: 2) and, as a result, adolescents may not yet be mature enough to see the consequences of unsafe sexual practices. The immaturity of teenage brains is also endorsed by Woolfolk (2010:235) who asserts that the frontal cortex, which is responsible for reasoning and determines how we act, develops later and continues to develop into adulthood. Because of cognitive immaturity, an adolescent may be guided less by the frontal cortex and may not have a full understanding of moral behaviour, hence they may risk falling pregnant.

Cognitive limitations, failure to anticipate consequences, and lack of knowledge may all be factors that influence sexual decision making amongst adolescent females (Sigelman & Rider, 2012:40). Adolescent girls fall pregnant because they may not be adequately equipped with physiological and psychological facts to grasp the meaning of their own sexual acts and its repercussions for themselves and others (Vincent, 2012:19; Stapleton, 2010:16).

It is the interpretation of pregnancy that is still lacking in the minds of most adolescents. Future planning may be difficult because their cognitive developmental stage may not yet allow for serious planning for the future. Lindsay and Rodine (1989:27) posit that adolescents may still be in the concrete stage of thinking or may still be living in the here and now; hence they are actually unable to plan far into the future. Lack of anticipation of the future does not help adolescents to see the consequences of, for instance, their sexual activities. In other words, the female adolescent's cognitive limitations can impinge on their perceptions of teenage pregnancy. According to Piaget's theory of cognitive development, adolescents who are not yet solidly into the stage of formal operations may not be able to think through the long range consequences of their sexual behaviour, hence they are more prone to indulge in sexual practices that can result in teenage pregnancy (Sigelman & Rider, 2012:45).

Misconceptions about sexual activities and contraception are also rampant among many adolescents probably because of their cognitive limitations (Aarons & Jenkins, 2002:23). In one study of 13 to 15 year olds, more than 60 percent did not know that urinating after sex would not prevent pregnancy (Sigelman & Rider, 2012:45). The findings of this study signify the misconceptions which adolescents might have about sexual activities. The misconceptions may make adolescents more susceptible to early pregnancy.

Adolescents also experience early pregnancy because they may not be prepared to use contraception or they may use it inconsistently. Kiely (2010:57) found that 79.1 percent of females reported having had unwanted pregnancies because they were not motivated to use contraceptives. Adolescents are functioning at a cognitive level that renders them unable to practice most forms of birth control effectively (Rice, 1992:211). Contraceptive use requires some form of cognitive maturity for an adolescent to see the rewards of practising and taking responsibility for their actions. Rice (1992:211) posits that different forms of birth control demand acknowledgement that one is sexually active, especially to public health providers. The implication is that, because of societal stereotyping where sexuality is exclusively expected to be for adults, the adolescent female, whose cognitive level is still underdeveloped, finds herself in a very difficult position to acknowledge to adults that she is sexually active. Such adolescents, who may still lack independent thinking, may also be afraid that their use of contraception could be discovered by parents, hence they may continue to indulge in sexual acts without contraception. Most cultures do not condone adolescent sexual activities but adolescents indulge in sexual activities anyway without adequate information and protection. Vincent (2012:35) asserts that the non-recognition of adolescent sexual acts by many societies leaves some teenagers engaging in sexual activities without knowledge of how best to protect their sexual health, hence they fall pregnant and/or get sexually transmitted diseases (STDs).

Lindsay and Rodine (1989:27) posit that while knowledge of human reproduction and birth control is an important part of adolescent education, sex educators should bear in mind that this knowledge probably will not be utilised by the adolescent who is not functioning fully at the formal operational stage of cognitive development. Adolescents who are still operating in the concrete stage of thinking may actually be unable cognitively to plan far into the future. During this developmental stage, adolescents feel invulnerable (Zembar & Blume, 2009:371; Rice, 1992:210) putting them at risk of pregnancy because they may indulge in sexual acts without protection.

Slavin (2009:35) also found that cognitive skills such as decision-making skills and interpersonal assertiveness are still lacking for many adolescents. For example, the skill to say 'no' under peer pressure was found to be lacking amongst many female adolescents. Meece and Daniels (2008:117) thus emphasise that "values clarification to equip adolescents with the knowledge and skills necessary to negotiate sexual activities is paramount as a way to reduce teenage pregnancies".

Adolescents may also fall pregnant because of their impulsive behaviour. Zirpoli (2008:458) defines impulsivity as erratic and poorly controlled behaviour. Welton (2011:2) points out that, although an adolescent can think in an abstract way, he/she often is more impulsive than an adult. Adolescents who are impulsive appear to do things suddenly, without any planning ahead or considering the effects of their actions. Most adolescents are impulsive risk takers and hence have more chances of indulging in early sexual activities that may lead to early pregnancy (Welton, 2011:2). Impulsivity can also affect the moral development of adolescents, especially when it prevents the adolescents from making decisions based on moral responsibility. In so doing, such adolescents may fail to respect moral principles by indulging in sexual acts that can lead to early pregnancy.

Adolescent thinking patterns may influence female adolescents to engage in early sexual acts that may lead to teenage pregnancy. One of the most interesting thinking patterns of adolescents is adolescent egocentrism (Woolfolk, 2010:38; Kail & Cavanaugh, 2007:342; Louw & Louw, 2007:240; Elkind, 1966:493). Adolescent egocentrism is a developmentally normal cognitive limitation. Bergin and Bergin (2012:97) describe egocentrism as the tendency to see the world from one's own point of view, while failing to see other people's points of view. Adolescent egocentrism usually appears around eleven or twelve years of age and recedes around fifteen or sixteen years. Bergin and Bergin (2012:97) posit that an adolescent may think that even though serious catastrophes may happen to others, it will never happen to her; for instance, she will never get seriously ill. It is a belief that their lives are unique and they are safe from many problems such as pregnancy (Bergin & Bergin, 2012:97).

Adolescent egocentrism is also expressed in the idealistic crisis or crisis of juvenile originality in which adolescents believe that they have limited possibilities and must push these possibilities to their very limit (Owens, 2002:508). When an adolescent sees limited possibilities, the adolescent may see few chances in life. Such a belief may push an adolescent to grab every chance that comes her way, including inappropriate sexual acts. Many adolescents are often in a hurry to explore possibilities. Adolescents' idealistic tendencies can influence them to irrationally experiment with sexual acts which can result in early pregnancy. Vygotsky (1978:102) commented on adolescents' idealistic tendencies by asserting that exploration becomes a serious activity amongst many adolescents, thus approximately one third of all teenagers are at extremely high risk because they "do it all". Although adolescents may not be fully formal operational thinkers, they may be keen to test

different hypotheses (Woolfolk, 2010:38), in other words, generating different possibilities such as indulging in sexual activities without or with insufficient protection. According to Adams (2000:23), hypotheses are possibilities that may turn out to be impossibilities, thus adolescents who experiment in sexual activities, for instance, may realise their mistakes after they have fallen pregnant.

One major effect of adolescent intellectual transformation is the development of a new form of egocentrism at eleven to fifteen years of age which manifests itself in two ways, namely the imaginary audience and the personal fable (Zembar & Blume, 2009:371; Kail & Cavanaugh, 2007:342-343). McDevitt and Ormrod (2010:452) assert that the imaginary audience is a belief that one is the centre of attention in any social situation. Teenagers (girls especially) are often preoccupied with their physical appearance and can be quite self-critical. Many adolescents change the way they speak and act according to whom they are interacting with at that moment, thereby increasing the chances that they will gain others' approval (Zembar & Blume, 2009:371). They may go overboard in trying to please others or alternatively become overly sensitive to others' remarks. As adolescents develop the capacity to think about their own thoughts, they become acutely aware of themselves, their person and their ideas. As a result, they become egocentric, self-conscious and introspective. Such self-absorption as Kail and Cavanaugh (2007:342) describe, may cloud an adolescent's judgment of the possibility of pregnancy. Rice (1992:2011) explains that being primarily concerned with themselves, adolescents may think that others are as obsessed with their sexual behaviours and sexual activities as they are themselves. A female adolescent who thinks that others are obsessed with their sexual activities may not evaluate the real consequences of her sexual acts, hence become susceptible to early pregnancy.

Another form of egocentrism in adolescence is the personal fable. McDevitt and Ormrod (2010:451) posit that the personal fable is a belief held by many adolescents that they are unique beings, less vulnerable to normal risks and dangers. Such tendencies slowly fade away in late adolescence. The personal fable is an over differentiation of the self from others in which the adolescent fails to see similarity in the experiences of self and others, leaving him or her with an exaggerated feeling of personal uniqueness (McDevitt & Ormrod, 2010:451). Because of their imaginary audiences and their belief that they are important to so many people, adolescents regard themselves as special and unique. Adolescents thus develop a unique sense of their own immortality and invulnerability to harm. Kail and Cavanaugh (2007:279) assert that adolescents' belief in their uniqueness contributes to an illusion of

invulnerability, the belief that misfortune only happens to others. They may think that they can have sex without becoming pregnant and they can drive recklessly without being involved in an accident (McDevitt & Ormrod, 2010:451). This may be why so many adolescents believe that unwanted pregnancies will happen only to others, never to them (Rice, 1992:2011). A teenage girl may become pregnant because, in part at least, her personal fable convinces her that pregnancy will happen to others, but never to her and she thus does not need to take precautions (Owens, 2002:550).

The personal fable of adolescents may affect their use of contraception (Kail & Cavanaugh, 2007:342). Adolescents may not use contraceptives partly because their personal fable convinces them that pregnancy will happen to others but never to them. The American Academy of Pediatrics (1989:133) asserts that the news that an adolescent girl is pregnant usually comes as a shock, and often not a welcome one. It means that many adolescents who get pregnant are shocked to discover they are pregnant because of their mistaken beliefs about pregnancy.

The personal fable is also reflected in the female adolescent's feeling that no one can possibly understand her joys, trials and tribulations except herself (Elkind, 1978:56). Even when significant others try to intervene to restrain such adolescents, it may become a futile exercise because of such strong beliefs in themselves. Rice (1992:2010) asserts that a teenage girl may be convinced that no one understands the love she feels for her boyfriend except herself. It means that such an adolescent is not prepared to listen to anyone regarding her sexual acts and thus may fall pregnant.

Adolescents can also develop the sterile fable whereby they may believe that they are sterile because they have had sexual intercourse many times without falling pregnant (Kail & Cavanaugh, 2007:342). In such cases the adolescents may continue to indulge in sexual activities, thinking that they will not fall pregnant, but such a mistaken belief may lead to unwanted pregnancies. They can also develop the gamblers fable in which they may have the mistaken belief that pregnancy will not result the first time or the first few times of sexual intercourse (McDevitt & Ormrod, 210:451; Elkind, 1978:57), thus such adolescents may engage in inappropriate sexual acts which can result in early pregnancy.

Elkind (1978:57), in reference to adolescent thinking patterns, points out that young adolescents also often demonstrate what he calls pseudo stupidity, the tendency to approach problems at a seemingly complex level and fail, not because the tasks are difficult, but

because they are too simple. They try to solve a problem by holding a number of variables in mind at the same time but lack the capacity to assign priorities and to decide which choice is more appropriate (Rice, 1992:212). In other words, the ability to perform formal operations gives adolescents the capacity to consider alternatives, but this new-found capacity is not completely under control, hence adolescents may fall pregnant because of inappropriate choices. Allen and Dowling (1998:23) attempt to sum it up by asserting that the majority of teenage conceptions are purportedly unintended, occurring as a result of contraceptive failure and their cognitive limitations.

2.3.3 The effects of teenage pregnancy on cognitive development

Teenage pregnancy has negative implications for adolescent intellectual development mainly because it interferes with (or inhibits) major factors that promote cognitive developmental processes such as brain maturation and the social environment of the adolescent. The pregnant adolescent is still developing in all aspects of becoming a more mature human being, thus pregnancy can affect the smooth transition from adolescence to adulthood.

The adverse health outcomes associated with pregnancy can interfere with the normal cognitive development of a female adolescent. Piaget's theory of cognitive development emphasises that nature and nurture interact to produce cognitive development (Cherry, 2014b:1; Meece & Daniels, 2008:36). Nature, according to Piaget, entails maturation of brain and body which enhances a person's ability to perceive, learn or act and it also motivates an individual to explore the environment. Piaget proposed that as a result of both brain maturation and a wide variety of environmental experiences, children proceed through a sequence of four stages of cognitive development (McDevitt & Ormrod, 2010:196). Each stage of cognitive development builds on the accomplishment of any preceding stages. The formal operations stage, for instance, builds on the preceding stage of the concrete operations stage, a process that indicates the importance of brain maturation in cognitive development. Teenage pregnancy is associated with adverse health outcomes for both the mother and child, thus it affects the smooth process of brain maturation of the adolescent. If brain development is affected by poor health, which may be caused by early pregnancy, it implies that cognitive growth is also affected. Ehow (2013:1) explains that, developmentally speaking, teenage pregnancy affects a young mother both physically and mentally.

When teenage pregnancy affects maturation of the adolescent, it can also in turn deter active engagement of the adolescent with the physical environment. McDevitt and Ormrod

(2010:194) contend that Piaget's cognitive theory postulates that active engagement with the physical environment is critical for cognitive development. Piaget's fundamental insight was that individuals construct their own understanding, that is, learning is a constructive process (McDevitt & Ormrod, 2010:194). Active engagement with the environment includes exploring and manipulating the world. It includes conducting many little experiments with various objects and substances. In the process of doing so an adolescent learns the nature and characteristics of such objects, leading to cognitive growth (McDevitt & Ormrod, 2010:194). Piaget, in emphasising the importance of active engagement with the environment, indicates that knowledge is not a copy of reality. To know an object is to act on it. To know is to modify, to transform the object and to understand the process of this transformation and as a consequence to understand the way the object is constructed. In other words, the adolescent must in a way be intrinsically motivated to engage actively with the environment to realise cognitive growth (Owens, 2002:532; Woolfolk, 2010:32).

Active engagement also includes mental manipulation of ideas. Woolfolk (2010:57) asserts that it is not only physical manipulation of objects but also mental manipulation of ideas that arise out of class projects or experiments at school. It means that active engagement with the environment includes brain storming over or talking about the objects being manipulated which, according to Piaget, is necessary for cognitive growth (Bergin & Bergin, 2012:96). For active engagements with objects and ideas in the environment to take place, an adolescent has to be cognitively mature and healthy. The adverse health outcomes associated with pregnancy can negatively affect active engagement of an adolescent with the environment and therefore may deter cognitive growth. Shearer, Mulvihill, Klerman, Wallander, Hovinga and Redden (2002:236), also commenting on the effects of pregnancy on active engagement, report that when pregnant a female can feel tired and sluggish due to major hormonal changes. The temperature of the pregnant female for instance sometimes gets higher due to the amount of progesterone circulating in the body and as a result the pregnant teenager may feel a little sluggish and weak (Shearer et al., 2002:236). When an adolescent is unhealthy due to pregnancy related complications it means that the adolescent may not be able to engage actively with the environment. According to Piaget, if an adolescent is unable to actively engage with the environment, cognitive development is adversely affected.

Teenage pregnancy can also disturb the social environment of the female adolescent which in turn may affect cognitive growth. Piaget and Vygotsky's theories emphasise the significance of the social environment in various processes of cognitive growth. McDevitt and Ormrod

(2010:195) indicate that although Piaget believed that children themselves construct their knowledge and understanding of the world, they nevertheless have much to learn from interacting with others. Interaction with other people (such as parents, teachers and older peers) is critical for cognitive development. By conversing, exchanging ideas and arguing with others, they gradually come to realise that different individuals see things differently. So social interactions help children develop awareness and understanding of others and this is part of intellectual growth.

According to Piaget, the social environment of a child can also determine the process of equilibration which is paramount for intellectual growth (Arnett, 2013:61; Kail & Cavanaugh, 2007:221). Equilibration is a unique concept in Piaget's theory that refers to our innate tendency to keep our cognitive structures in balance. Rutherford (2011:33) explains that equilibration is Piaget's process of balancing assimilation and accommodation in order to maintain a stable understanding of the world. For a child to assimilate and accommodate new information, he/she must be actively engaged in the social and physical environments.

Piaget's theory also postulates that adolescents can influence each other's cognitive development when they say or do something that is in conflict with the others' thinking, thus promoting the state of disequilibrium (Max, 1993:179). It means that new challenges (disequilibrium) are mainly caused by other adolescents or significant others in an interactional setting. Woolfolk (2010:49) asserts that disequilibrium must be there to encourage intellectual growth. Cognitive conflicts (the state of disequilibrium) lead adolescents to restructure their thinking (accommodate) in order to restore a balance (equilibrium) (Max, 1993:179). By altering and adjusting our cognitive structures, we maintain the state of equilibrium which, in turn, maintains organisation and stability in our environment.

Woolfolk (2010:50) indicates that Vygotsky believed that the child is not alone in the world of discovery but is assisted or mediated by family members, teachers, peers and even software tools such as computers. Through both informal interactions and formal schooling, adults convey to children the ways in which they can interpret the world (McDevitt & Ormrod, 2010:210). Vygotsky also mentions the term scaffolding which refers to the process by which adults provide support to a child who is learning to master a task or problem. Scaffolding, according to Vygotsky, can be in the form of verbal or physical assistance which promotes children's cognitive growth.

Teenage pregnancy disturbs the social environment of the adolescent mainly by promoting social exclusion which emanates from isolation and stigmatisation of the pregnant teenager (Chigona & Chetty, 2008:144). When the social environment of the adolescent is affected, it inhibits free collaboration of the adolescent with the environment thereby inhibiting cognitive development. In other words, the processes of equilibration, scaffolding and active engagement suggested by Piaget and Vygotsky are all disturbed in a social environment in which the female adolescent is isolated or stigmatised by her pregnancy. The onset of teenage pregnancy does not promote free collaboration of the teenager with other students, teachers and significant adults through its associated stigma, isolation and ultimately social exclusion. The cognitive development of a pregnant teenager may be delayed partly because the social transmission of information and knowledge which is paramount for cognitive development is disturbed in a stigmatised social environment caused by pregnancy. Meece and Daniels (2008:161) emphasise that no real intellectual activity can be carried out in the form of experimental actions and spontaneous investigations without free collaboration among individuals, implying that if pregnancy disturbs that social environment the female adolescent's cognitive growth may be negatively affected.

2.4 SOCIAL DEVELOPMENT

2.4.1 An overview of social development

Many transformations occur in the social domain of development, such as development of trust and confidence of an individual to interact with other people (McDevitt & Ormrod, 2010:340). Social development can be defined as the process in which human beings learn to interact with other people around them be it in the family or other settings in society such as schools (Woolfolk, 2010:349; McDevitt & Ormrod, 2010:404). Zembar and Blume (2009:304) contend that social development includes acquiring social skills, increasing interpersonal understanding, refining concepts of friendship and using moral reasoning to guide social interactions with family and peers. It mostly refers to how an individual establishes friendships and other relationships such as intimate relationships. It also includes how a person handles conflicts with other people (Seefeldt, 2010:1). Kail and Cavanaugh (2007:265) emphasise the importance of social development by asserting that socialisation is a major goal for all people since it involves teaching children the values, roles and behaviours of their culture.

The beginning of adolescence involves major social transformations for the adolescent. Rice (1992:321) asserts that the adolescent's social systems include conformity to the peer group, often contrary to the values of their parents. Adolescence is actually a transition period in which the adolescent gradually moves away from the confines of the family setting to include people outside the family such as peers. Arnett (2013:3) posits that adolescence is also marked by more sensitisation to gender identity and gender roles. In other words, adolescent social transformation entails establishing their true identity; hence they focus more on establishing their independence from parents.

Bronfenbrenner's bioecological and Bandura's social cognitive theories outline the various factors that influence adolescent social development. Bronfenbrenner (1979:3), for instance, saw the adolescent's environment as dynamic and ever changing.

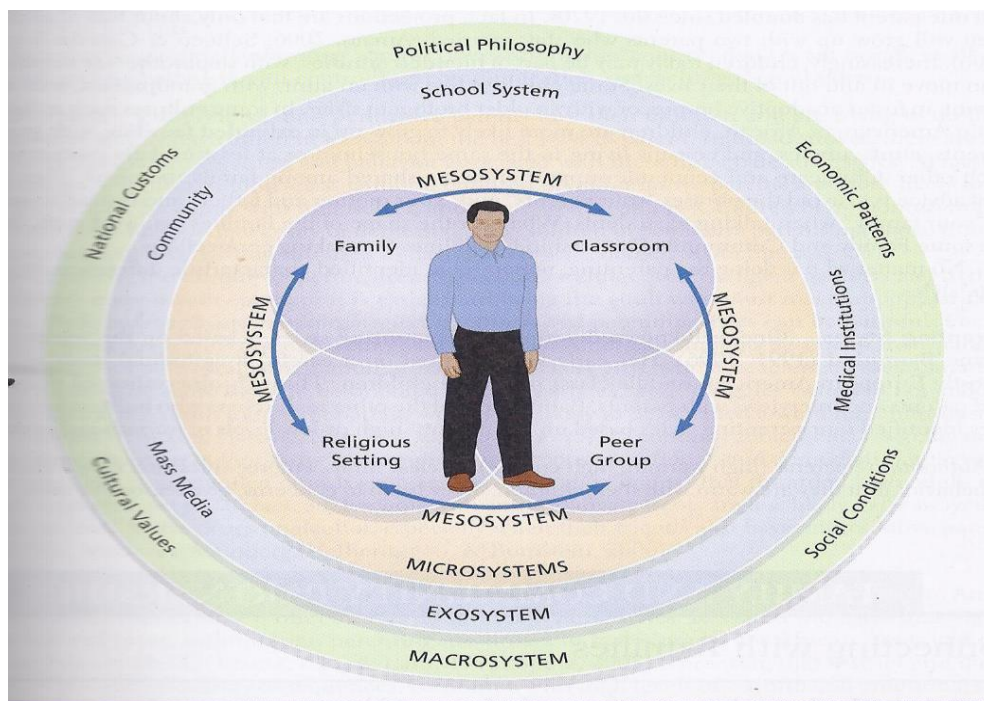


Figure 2.1 Urie Bronfenbrenner's bioecological model of human development

Adapted from Woolfolk (2010:67)

Woolfolk (2010:67) posits that, according to Bronfenbrenner's bioecological systems theory, every adolescent develops within a microsystem (family, friends, school activities and teachers), inside a mesosystem (the interactions among all the microsystem elements), embedded in an exosystem (social settings that affect the adolescent, even though the adolescent is not a direct member, such as community resources and parents' workplaces); all

of which are part of the macrosystem (the larger society with its laws, customs and values). Bronfenbrenner's (1979:3) bioecological theory postulates that adolescents grow up in specific families with certain belief and value systems; they are part of a community with its customs and traditions. They attend specific schools, play sports in teams and belong to recreational clubs. They live in a particular country with a specific government who makes rules and policies on, inter alia, education. All these contexts play a role in the social development of the adolescent including their sexual behaviours (Woolfolk, 2010:19; Ben-David, 2011:100; Matlala, 2011:89).

If Bandura's social cognitive and Bronfenbrenner's bioecological theories are juxtaposed, Bandura (1977:12) emphasises that within those nested structures (that is the microsystem, mesosystem, exosystem or macrosystems) as elaborated by Bronfenbrenner (1979:3), a significant part of what an adolescent learns occurs through observation, imitation or modelling. According to Bandura (1977:12), learning would be exceedingly laborious, not to mention hazardous, if people had to rely solely on the effects of their own actions to inform them what to do. Fortunately, most human behaviour is learned observationally through modelling. From observing others, an adolescent forms an idea of how new behaviours are performed, and on later occasions this coded information serves as a guide for actions. The social cognitive theory propounded by Bandura explains that adolescents learn through observation and imitation of the behaviour patterns of others but based on self-interest. Self-interest implies that an adolescent should be motivated in order to observe and imitate behaviours (McDevitt & Ormrod, 2010:17; Owens, 2002: 24).

All aspects of adolescent development, that is, physical, sexual, cognitive, personality, social and moral development, occur within a social context which may either promote or hamper development (Louw & Louw, 2007:325). In other words, genes, adolescents' own efforts at understanding, social economic circumstances (such as poverty), rewards from adults and cultural tools (such as language) are all contexts that combine to govern adolescents' development and their perceptions of teenage pregnancy in particular (McDevitt & Ormrod, 2010:16).

2.4.2 Social development and its influence on teenage pregnancy

According to Bronfenbrenner's bioecological theory, much of a female adolescent's socialisation happens within the microsystem. Bronfenbrenner (1979:38) acknowledges that

the microsystem is most influential to the female adolescent because it includes the settings within which the adolescent directly interacts such as the family, peers and the school.

According to Ben-David (2011:102), the most important setting for a young child is the family because it has emotional influence on them. Meece and Daniels (2008:446) also posit that the family is the child's primary source of support and nurture in early development; hence it is quite powerful in influencing adolescent behaviour. The family is the most natural unit and helps to shape important personal decisions such as sexual decision making by the female adolescent (McDevitt & Ormrod, 2010:68; Rathus, 2006:446). Stuart and Wells (1992:200), for instance, explain that research indicates that female adolescents' experiences of contraception are related to the way their mothers viewed sex. Even limited instruction from the mother has a positive or negative impact on the daughter's use of contraception (Stuart & Wells, 1992:200). It means that within the family the female adolescent can learn the importance of contraception, especially from the mother. If she regards it as important it can be a powerful influence on the female adolescent to use contraception. If the female adolescent learns to ignore contraception, then she can fall pregnant. The family is a major source for the development of values, beliefs and attitudes particularly in relation to sexual behaviour.

According to Bandura's (1986:36) social cognitive theory, parents and other siblings at home can also provide inappropriate models for young female adolescents to fall pregnant. Research highlights that the sisters of pregnant teenagers, for instance, are more likely to fall pregnant especially when they view the pregnancy positively (Sigelman & Rider, 2012:60).

The particular configuration of people who live together in a given family unit also has a bearing on female adolescents' perceptions of teenage pregnancy. Single-parent and two-parent households have their own implications for teenage pregnancy. Research has shown that monitoring is less vigilant and discipline more permissive in single- than in two-parent households (Silbereisen & Todt, 1994:11). As a result, adolescents from single-parent families show greater risks of negative consequences in educational attainment and sexual activity (Meece & Daniels, 2008:455). With regard to sexual activity, girls from single-parent families which are characterised by more permissiveness, report earlier onset of sexual activity and thus show a higher rate of teenage pregnancy (Adams, 2000:23).

Adams' (2000:23) and Trommsdorff and Chen's (2012:6) studies revealed that father absence in a home can promote the development of early menarche which in turn can influence the

girls to engage in early sexual activities. According to Adams' (2000:24) findings, father absence in early childhood especially, can also create an impression in a child of an unpredictable future and lack of resources. Such an impression, in Adams' (2000:24) view, is associated with influencing the onset of early puberty. It may be so because many cultures look forward to fathers to provide financial support for the families; therefore, the absence of the father can be interpreted by the female child as an indication of a bleak future with few resources.

Female adolescent perceptions of pregnancy can also be influenced by peer groups. Meece and Daniels (2008:412) posit that one of the greatest social changes for adolescents is the importance of their peers. This change allows them to gain independence from their families (Meece & Daniels, 2008:412). By identifying with peers, adolescents start to develop moral judgments and values and to explore how they differ from their parents (Max, 1993:57). The intensity of involvement with a peer group gives way to more intimate friendships and romances which may culminate in sexual acts that can result in early pregnancy (Sigelman & Rider, 2012:58). Peer relations tend to be more egalitarian and balanced than relations with parents and other adults (Meece & Daniels, 2008: 412) because in peer interactions no one claims to have authority over the other, as happens with parents. This equality in peer interactions provides a context for the development of many important interpersonal skills such as those related to sexual relationships.

Conformity to peer norms and expectations tends to be greater in early adolescence than in childhood. Young adolescents are more susceptible to peer pressure perhaps because of their greater concerns about social acceptance at this age (Adams, 2000:137). Vincent (2012:34) asserts that peer pressure is a subtler, almost self-imposed pressure, emanating from a desire to avoid standing out as different, in this case by appearing to be sexually naïve. Vincent's (2012:34) findings reveal that some female adolescents do not want to feel left out by being the only virgin in their peer group; hence they succumb to peer pressure to indulge in sexual acts. Owens' (2002:508) research also reveals the power of peer pressure by highlighting the sentiments of a female adolescent who said, "I felt sure I was the only one left in my crowd who had not had sex". Such a statement by a teenage girl who fell pregnant signifies the fact that peer pressure can lead to dire consequences such as teenage pregnancy.

School interactions can also influence female adolescents' perceptions of pregnancy. Meece and Daniels (2008: 8) posit that by the time young people graduate from high school they will

have spent more than 10 000 hours in school; thus school interactions are quite influential in the social development of an adolescent. Bronfenbrenner's bioecological theory indicates that a school is an important part of the microsystems since it has direct influence on the adolescent. One of the key tasks for schools is, through appropriate information and effective advice on contraception and on delaying sexual activity, to reduce the incidence of unwanted pregnancies (Vincent, 2012:32). However, some schools are found wanting when it comes to sexuality education. Vincent (2012: 35), for instance, asserts that some teachers believe that sexual knowledge and access to contraception encourages promiscuity among young people while others believe knowledge helps young people to make informed decisions. In such conflicting school environments, a female adolescent may not get adequate information about sexuality. Such scenarios may cause adolescents to indulge in sexual acts without adequate knowledge and as a result they can fall pregnant. Many schools and communities do not accept adolescent sexual acts and this puts adolescents in a very difficult position to acknowledge their sexual acts by seeking contraceptives, hence they fall pregnant. Vincent's (2012:139) research reveals the sentiments of a teenage mother who said that she felt embarrassed to access contraception because of her age, yet she did not feel too young to be having sex with her boyfriend. It implies that such female adolescents may practise sex without protection and as a result they may fall pregnant.

According to Bandura's social cognitive theory, in a school situation where many female adolescent learners are falling pregnant, the implication is that many of the female adolescents may model inappropriate sexual behaviours, resulting in an increase in teenage pregnancies in schools. It means that the power of observation and imitation, as postulated by Bandura, is playing a role in influencing female adolescent learners to engage in sexual behaviour and thus risk falling pregnant.

Bandura (1986:36) also emphasises vicarious reinforcement as a motivating factor that can influence female adolescents' social behaviours. Female adolescent learners, for example, observe other learners who fall pregnant benefitting from child support grants every month. According to Bandura's view of vicarious reinforcement, such adolescents can be indirectly reinforced to fall pregnant in order to access the grants. Some female adolescent learners, especially from poor economic backgrounds, may also observe their friends benefitting financially from boyfriends. Such adolescents may be indirectly reinforced to get into relationships with boyfriends (especially older men) for the possible gains in such relationships, making them prone to falling pregnant. Sigelman and Rider (2012:60)

emphasise the importance of providing teenagers with fewer examples of irresponsible sexual behaviour in order to help them learn that the consequences of safe sex are more desirable than the consequences of early parenthood. The prevalence of teenage pregnancies in some schools is in contrast to Sigelman and Rider's (2012:60) view; hence they continue to experience more teenage pregnancies.

Bandura (1986:15) also emphasises the power of self-efficacy in influencing adolescent social development and early pregnancy. Bandura (1977:25) used the term 'self-efficacy' to refer to a person's belief that he or she can successfully carry out a task. Bandura's idea of self-efficacy helps to explain that if a male believes that using a condom will decrease his sexual enjoyment, his belief may decrease the chances that he and his partner will use protection (Sigelman & Rider, 2012:58), hence pregnancy may be the end result. Many adolescent female learners might also have a strong belief that even if they fall pregnant they can still come back to school and complete their education. Such perceptions might also be vicariously reinforced upon observing other female learners who successfully complete their high school after falling pregnant. It helps to explain why many female adolescent learners are falling pregnant in high schools.

2.4.3 Effects of teenage pregnancy on social development

Whilst social development impacts on teenage pregnancy, teenage pregnancy also affects normal social development not only of adolescent mothers, but also their babies. The interplay between the female adolescent and the social environment is captured in Bandura's concept of reciprocal determinism (Bandura, 1986:37; Bandura, 2001:6; McDevitt & Ormrod, 2010:16; Sprinthall & Sprinthall, 1994:258). Bandura postulates that people are products of their environment, but they also choose and shape their environments (Owens, 2002:23). Bronfenbrenner's bioecological theory also recognises that people are not mere recipients of the experiences they have in the environment, but contribute to the construction of the environment (McDevitt & Ormrod, 2010:16). It means that, whilst the female adolescents can be influenced by the environment to get pregnant (for example through peer pressure); reciprocally the pregnancy also affects the adolescents concerned as well as other people around them.

The responses which pregnant female adolescents experience from the environment can negatively affect their social development. Pregnant adolescents are sometimes affected socially especially when they experience negative attitudes from teachers at school. Vincent

(2012:140) asserts that adolescent mothers sometimes face what he refers to as “unhelpful non recognition of their difference”. It means that many schools do not give any special attention to the pregnant adolescents’ needs, for example pregnant girls may need rest at times. Vincent (2012:140) states that ignoring fluctuating energy levels and emotional sensitivities associated with pregnancy are some of the challenges that pregnant adolescents find difficult to cope with in schools. The assumption in some schools is that school is for education, regardless of being pregnant, thus pregnant teenagers who wish to pursue their education and have different needs from others find it difficult to cope. It means that, when pregnant adolescents are not given special attention in respect of their condition, they may find it difficult to adjust socially and to finish their schooling.

Negative teacher attitudes, lack of encouragement and the lack of formal processes experienced by some pregnant adolescents can also reinforce feelings of shame and exacerbate feelings of alienation, thus demotivating them in the process. It can lead to self-exclusion and non-completion of work by the pregnant adolescent, which in turn reinforces assumptions by the school that a pregnant learner is an educational failure (Vincent, 2012:140). Unfair treatment of pregnant teenagers in some schools results in the internalisation of shame, feelings of guilt and an acceptance of disrespectful treatment as normal. When this stigma is internalised, it undermines personal confidence and capability, thus impacting the psychological, social and scholastic development of the adolescent. The negative attitudes and associated shame about adolescent sex, not only in schools but in communities as well, affects young people’s thoughts, feelings and behaviour sometimes in ways that are detrimental to their social development and that reinforce negative stereotypes.

Chigona and Chetty (2008:144) also explain that pregnant adolescents are not always well received by their peers, and it fuels a sense of isolation and stigmatisation which undermines their experience of school as a nurturing space. Kelly (2004:34) also posits that some pregnant adolescents face negative stereotyping from other students and sometimes teachers which are manifested by labels such as “stupid sluts”, and “welfare moms” and “neglectful mothers”. Such negative stereotypes are fertile grounds for social frustrations which do not promote normal adolescent social development. It implies that teenage pregnancy can impact social interactions, especially at school, hence it affects normal social development.

Teenage pregnancy can also affect the social development of pregnant adolescents by promoting social exclusion. Due to cultural views about early or unwanted pregnancies, some

pregnant adolescents may feel isolated and rejected by people close to them such as peers. Vincent (2012:4) explains that pregnant adolescents create discomfort and wariness in people through their embodied confirmation of uncontained and unconstrained adolescent sexuality. Pregnant teenagers are highly visible to the public gaze (Vincent, 2012:55), and thus are susceptible to all sorts of reactions from people. It implies that the public generally does not respect teenage pregnancy; hence most pregnant adolescents experience ambivalent responses from them. In so doing, adolescent mothers can be forced into social exclusion which is quite inimical to normal social development.

Booker (2010:2) also states that adolescent pregnancy can rob an adolescent of her youth. While some adolescents are out there having fun, the pregnant adolescent may have to stay at home nursing her sore feet or back or may spend her time preparing for the baby's arrival (Booker, 2010:2; Wood, 2012:3). Mood swings will be worse than they already are in adolescence thereby negatively impacting their schooling and relationships with friends (Ehow, 2013:1, Weiss & Correia, 2012:5). The feeling of guilt in the teenager may also force the teenager not to relate well with parents, friends and other people in the community. All such factors culminate in the reduction of the female adolescents' social contacts which, in turn, adversely affect their social development.

Teenage pregnancy also impacts on social development by promoting gender inequalities. Teenage pregnancy can negatively affect the future prospects of female adolescents especially if it stops them from completing school and from securing good employment opportunities in comparison to their male counterparts. Teenage mothers in most cases do not complete their education, hence they may not be able to secure employment. In such situations the pregnant adolescent may then rely more on her parents or the support of the father of the child and thus the adolescent would not be empowered economically. Teenage pregnancy thus contributes to gender inequality and perpetuates the subordinate position of women by promoting male dominance because of adolescents' dependency on men. In other words, adolescent pregnancy can hinder the social mobility of the female adolescents and in turn impacts on their social development in the process.

Teenage pregnancy can also affect social development by its tendency to interrupt the normal lines of maturation of the female adolescent. When pregnancy occurs during adolescence, the typical drive of moving from a more dependent relationship to an independent relationship is disrupted because the teenager may not be able to look after herself and the baby (Herzog et

al., 2007:245). The implication is that, instead of promoting social development, teenage pregnancy draws the female adolescent backwards into a dependent position especially in the family.

Herzog et al. (2007:245) also assert that national figures indicate that 79 percent of teenage mothers fail to secure marital relationships. In view of Erikson's theory of psychosocial development, a crisis is created when a child fails to secure a stable marital relationship. In Erikson's stage of intimacy versus isolation, for instance, a child who fails to secure intimacy experiences the crisis of isolation. Teenage pregnancy is thus seen to be both a cause and a consequence of social exclusion which negates normal social development.

Teenage pregnancy can also affect the social development of other female adolescents. Stapleton (2010:19) posits that longitudinal studies reveal intergenerational transmission of parenting norms as evidenced by the substantial numbers of teenage mothers who are daughters of teenage mothers. In view of Bandura's theory of social cognitive theory, sisters of pregnant teenagers model and imitate such behaviours and may end up pregnant as well. The high rate of teenage pregnancy creates a situation whereby non-pregnant adolescents can model inappropriate sexual behaviours. When a significant proportion of young mothers become pregnant more than once during adolescence (Owens, 2002:27), it signifies an inappropriate pattern of behaviour that indicates inappropriate forms of social development.

2.5 EMOTIONAL AND PSYCHOLOGICAL DEVELOPMENT

2.5.1 An overview of emotional and psychological development

Steuer (1994:420) posits that emotion, also called affect, may involve internal bodily changes and sensations, outward behavioural manifestations such as facial, vocal, gestural, or postural expressions, cognitive awareness; and/or communication with another person or some combination of these. Emotional and psychological development thus involves the understanding, control and expression of a range of emotions (Rathus, 2006:350; Steuer, 1994:454; McDevitt & Ormrod, 2010:412). It also includes the development of the child's self-esteem, confidence, self-worth, trust and attachment to significant others such as parents (Steuer, 1994:454; Buck, 2010:1).

Adolescence is a time of heightened emotional instability or fluctuations mainly as a result of their complex physical, cognitive, personality and social development (Zembar & Blume,

2009:415; Louw & Louw, 2007:309; Owens, 2002:570; Woolfolk, 2010:397; McDevitt & Ormrod, 2010:422). Arnett (2013:157) posits that adolescents' emotional or psychological volatility is mainly influenced by their experiences of multiple life changes and personal transitions during adolescence, such as the onset of puberty, changing schools and the first romantic and sexual experiences. Arnett (2013:157), acknowledging the tumultuous change of puberty and adolescence, also contends that adolescents are more susceptible to emotional instability mainly due to hormonal changes that accompany puberty. The adolescent period thus brings new anxieties and pressures to the adolescent, impacting their emotional stability in the process.

2.5.2 The influence of emotional and psychological development on teenage pregnancy

Emotional volatility or instability of female adolescents can influence their perceptions of early pregnancy, especially when it clouds their judgments of potential consequences associated with adolescent sexual acts. Arnett (2013:158) explains that research indicated that adolescents report more extremes of emotions than pre-adolescents or adults probably because of rapid developmental changes associated with puberty. Because of rapid developmental changes, adolescents are more likely to feel awkward, lonely, nervous and ignored (Arnett, 2013:158). As a result, they may seek attention from people outside their families such as peers, thereby increasing their risks of early pregnancy. Arnett (2013:158) explains that because of immaturity of the mind, adolescents often respond to stimuli more with the heart than with the head, whereas adults tend to respond in a more controlled and rational way. In so doing, adolescents are more vulnerable to risk behaviours than adults. It means that besides their emotional instability which is mainly caused by rapid changes in puberty, adolescents' thinking capacities may still be inadequate to come up with rational decisions concerning their sexual acts. Hence female adolescents may succumb to the risks of early pregnancy. Erikson's (1968:174) psychosocial theory postulates that during psychosocial development there are sensitive points of development which he called crisis points. The crisis, according to Erikson, is a turning point of increased vulnerability or enhanced potential, so when a female adolescent is emotionally unstable she can be vulnerable to early pregnancy (Arnett, 2013:157; McDevitt & Ormrod, 2010:404).

According to Erikson (1968:174), adolescents may succumb to early pregnancy during their search for an identity. Taking Erikson's psychosocial theory into perspective, Sigelman and Rider (2012:38) explain that unwanted teenage pregnancy occurs primarily due to the

adolescent psychosocial conflict of identity versus role confusion. Erikson (1968:255) argues that adolescents face a crisis between identity and role confusion. This crisis involves balancing the desire to try out many possible selves and the need to select a single self (Kail & Cavanaugh, 2007:340; Sternberg & Williams; 2010:77). Arnett (2013:158), also referring to Erikson's psychosocial theory, posits that adolescence is a stage of psychosocial moratorium, a period when adult responsibilities are postponed as young people try out various possible selves. Louw and Louw (2007:309) point out that society allows adolescents a certain period of time, called the psychosocial moratorium, to make adolescents find themselves and their roles as adults. Experimentation takes place during this psychosocial moratorium by, for instance, trying out various identities, by endless self-examination, fantasising about roles and identifying with other people (Louw & Louw, 2007:309; Bohlin, Durwin & Resse-Wesser, 2012:33). In their quest to experiment with different roles, such adolescents can try drugs, join radical groups and have sexual intercourse. Thus, falling in love is part of identity formation because during this process the female adolescent gets a clearer sense of herself through intimate interactions with other people (Arnett, 2013:158). The intimate interactions of adolescents are part of their search for sexual identity but it may result in early pregnancy.

Adolescents may also succumb to early pregnancy due to identity confusion. According to Erikson, unresolved conflicts in the psychosocial stages lead to a crisis (Stern, 2007:1). Erikson (1968:174) posits that some adolescents find it difficult to sort out the possibilities that life presents to them and they may remain in a state of identity confusion. Arnett (2013:163) points out that when adolescents develop identity confusion they can reject acceptable possibilities for love, work and ideology offered by society and instead deliberately embrace what society considers unacceptable, strange, contemptible and offensive. Such adolescents can indulge in inappropriate sexual activities that can lead to early pregnancy. According to Erikson's (1968:175) psychosocial theory, such adolescents may, for instance, try to find an easy resolution to their role confusion by prematurely latching onto an identity as the other's boyfriend or girlfriend rather than doing the hard work of experimenting to find out who they are. An adolescent with negative identity may also adopt one pattern of behaviour in rebellion against certain demands and may end up doing the opposite of what is expected of them by parents especially. For example, a girl can become sexually permissive to punish her mother for trying to keep unreasonably strict control over her (Sigelman & Rider, 2012:38) and that permissiveness can lead to unwanted pregnancy.

Sigelman and Rider (2012:38) contend that some adolescents actually plan their pregnancy and view early motherhood as a chance to create a new identity which will change their life course for the better. Some teenagers may think that by falling pregnant they will be in a position to access child support grants or possibly make their partners care for them (Sigelman & Rider, 2012:39). The adolescents who lack self-identity and self-worth are therefore more likely to fall pregnant. It means that, as the world of adolescents expands, they have a greater variety of social experiences with people from diverse backgrounds (McDevitt & Ormrod, 2010:452), and thus they may need proper guidance for them to achieve true identity and to avoid unforeseen circumstances such as teenage pregnancy.

Lack of self-confidence and low self-esteem can influence adolescent sexual behaviour (Kail & Cavanaugh, 2007:345). Bergin and Bergin (2012:398) explain that there is a correlation between low self-esteem and inappropriate behaviour, which includes adolescent sexual acts that often result in early pregnancy. An adolescent who develops low self-confidence, which can be a manifestation of an unstable emotional and psychological state of the adolescent, may, for instance, not be able to say 'no' to a boyfriend (Louw & Louw, 2007:316; Lindsay & Rodine, 1989:27), thereby making herself vulnerable to early pregnancy. Saying no requires high self-esteem and a sense of self at a level even many adults have not achieved (Bergin & Bergin, 2012:398; Lindsay & Rodine, 1989:35). A teenager who has not yet found her own identity may also cling to her boyfriend, feeling her sense of worth comes from being with him (Zembar & Blume, 2009:415; Lindsay & Rodine, 1989:27) and yet that boyfriend can cause early pregnancy.

2.5.3 Teenage pregnancy effects on emotional and psychological development

Teenage pregnancy impacts on the emotional and psychological development of female adolescents. Vincent (2012:46) posits that challenges of motherhood are generic, but become severe on a teenage mother. The adolescent's newborn baby, for example, impacts on daily routines of the teenage mother because of the added responsibility and hence restricts the freedom of the teenage mother to come and go as she wishes. The lack of freedom can thus be stressful and impinge on the emotional development of the adolescent because adolescents value their newfound freedom.

All girls, regardless of pubertal timing, will experience some distress particularly at the time of most rapid changes but when pregnancy comes on top of that, the level of distress will be

enhanced (Max, 1993:19). Puberty, with its own changes in physical characteristics, is a disruptive experience that can give rise to emotional problems. McDevitt and Ormrod (2010:422) posit that adolescents' rapidly changing physical appearance as well as physiological changes can be a source of either excitement or dismay. Rising hormonal levels at puberty, for instance, are associated with increases in moodiness and depression in girls (McDevitt & Ormrod, 2010:422). Pregnancy brings its own set of physical and emotional changes such as negative body image which includes a distorted perception of one's shape and look, heightened mood swings and emotional sensitivity (Woolfolk, 2010:116; Weiss & Correia, 2012:6). In other words, a pregnant teenager's body will change physically into an unknown entity for the adolescent and hormonal balance will change resulting in mood fluctuations. Pregnancy and growth together will thus put extra demands on the adolescent thereby creating emotional and psychological problems.

Stuart and Wells (1992:35), elaborating on the emotional effects of teenage pregnancy, also posit that the pregnant adolescent may feel elated sometimes and may find herself overreacting to situations in an overly sensitive manner which may be an indication of emotional instability. The emotions are more elevated because the adolescent is still developing at the same time that the foetus is developing. Stuart and Wells' (1992:36) findings show that adolescents are usually not prepared for pregnancy because pregnancy conflicts with age-appropriate developmental needs. In other words, teenage pregnancy brings emotional and psychological problems to a still developing adolescent.

The disfigurement (physical changes) caused by pregnancy actually causes the adolescent mother to develop a negative body image which can ultimately affect her self-esteem. Body image is how the adolescent may perceive her appearance and how she believes others perceive how she looks. According to Cherry (2014b:1), self-esteem reflects a person's overall emotional evaluation of his or her own worth. It is a judgment of the self which involves an appraisal of one's own appearance, beliefs, emotions and behaviours. Leppert (1984:66) asserts that body image for an adolescent is particularly important since it has a direct effect on their self-esteem. It implies that if an adolescent develops a negative body image influenced by her pregnancy, it can affect her overall sense of self-esteem. The female adolescent may develop low self-esteem because she may feel that she is ugly. Leppert (1984:67) explains that the low self-esteem caused by pregnancy may put the teenager at risk of dropping out of school, alcohol abuse and even depression, all of which impinge on emotional and psychological development.

Max (1993:19) also explains that events that are considered to be occurring out of synchrony, either earlier or later than expected, are generally stressful thus the unexpected teenage pregnancy may cause an adolescent to exhibit adjustment difficulties. In most cases, adolescent pregnancy is unwanted and is a major consequence of adolescent sexual activity (Max, 1993:19), hence it may cause emotional problems in the teenager. The pregnant adolescents may feel guilty especially when they feel that becoming pregnant at their age runs counter to societal and often family expectations (Vincent, 2012:19). That guilty conscience makes the pregnant adolescents emotionally unstable.

Rogers (1969:22) postulates that adolescents internalise positive regard from significant others when they receive support, acceptance and approval. Pregnancy may promote a negative regard in an adolescent especially if significant others disapprove or do not show support of the pregnant adolescent. Hadfield, Rudole and Sanderson-Mann (2007:46) assert that the discrimination faced by teenage mothers causes stress and isolation, signifying a high level of psychological impact. Vincent (2012:58) also indicates that being an adolescent mother is the linchpin of unhelpful stereotypes and stigmatising discourses such as public ridicule which creates emotional instability in the adolescent. Traumatic experiences such as lack of family support during pregnancy can thus overwhelm a pregnant teenager emotionally. That is why some adolescents who fall pregnant may decide to leave school altogether mainly due to failure to withstand the pressures associated with pregnancy such as peer ridicule and teachers' negative attitudes to them.

Teenage pregnancy is also associated with unhealthy intimate relationships mainly because most of the relationships do not last or lead to marriage. In Erikson's (1968:173) view, the short-lived intimate relationships associated with teenage pregnancy result in no form of close or reciprocal relationships that in turn may create a sense of isolation in the adolescents. Such crises in female adolescents manifest in emotional and psychological turmoil. When an adolescent fails to pursue her goals due to pregnancy, the implication is that she may fail to attain her full potential as a human being. It therefore means that adolescent pregnancy can interrupt normal psychological and emotional development of the adolescent.

2.6 MORAL DEVELOPMENT

2.6.1 An overview of moral development

Moral development involves advancements in reasoning and behaviours in accordance with culturally prescribed or self-constructed standards of right and wrong (McDevitt & Ormrod, 2010:575). Moral development involves the formation of a system of values on which to base decisions concerning right or wrong; to use this knowledge to arrive at appropriate decisions when faced with complicated choices and to have the strength and independence to act in accordance with that decision despite the fact that it may not be a convenient thing to do (Choudhury, Blakemore & Charman, 2006:165; Owens, 2002:591). Morality can also be described as the intuitive sense of right and wrong that guides our behaviour and leads individuals to judge and possibly condemn others' behaviours (Rutherford, 2011:417). A synthesis of these views shows that moral reasoning is the basis for ethical behaviour. Moral decision making is determined by a person's reference points such as cultural values and self-imposed principles. Morality is thus the way people choose to live their lives according to their own set of guidelines or principles that govern their individual moral decisions (Dietrich, 2010:1; Oswalt, 2010:1).

The assumptions of moral development have been sculpted by the thinking of Jean Piaget and later by Lawrence Kohlberg. Both Piaget and Kohlberg believed that moral development builds on cognitive development. In other words, as people develop their cognitive abilities, their understanding of moral problems also become more sophisticated (Matlala, 2011:22).

Piaget postulated that children develop through two distinct stages of moral development which are heteronomous and autonomous morality (Pressley & McCormick, 2007:74; Piaget, 1972:67). According to Piaget's original formulation, children between the ages of five and ten years see the world through the lens of a heteronomous (other-directed) morality (Bergin & Bergin, 2012:354; Piaget, 1970:25). Bergin and Bergin (2012: 355) assert that heteronomous morality (moral realism or morality of constraint) is an authority-oriented morality in which rules are rigidly followed in order to avoid punishment, but not for internal reasons. As articulated by Piaget, in the stage of heteronomous morality, rules handed down by authority figures such as parents, teachers and government leaders, for instance, are seen as absolute and unbreakable. It means that heteronomous morality is imposed from outside and cannot be changed.

The second stage of moral reasoning, according to Piaget, is autonomous morality or morality of cooperation (Woolfolk, 2010:99). Starting at about 10 or 11 and continuing through adolescence, individuals generally begin to view moral rules as socially agreed upon and as guidelines to benefit the group (Pressley & McCormick, 2007:75; Matlala, 2011:42). It is reciprocity-oriented morality in which cooperation is internally motivated. Autonomy oriented individuals (which include adolescents) view rules as established through social agreement and as subject to modification in response to social needs (Dietrich, 2010:1). In this stage of autonomous morality, one's duty to follow rules is no longer defined in terms of obedience to authority, but rather in terms of respect for others (Matlala, 2011:42).

Kohlberg extended Piaget's theory, proposing that moral development is a continual process that occurs throughout the lifespan (Cherry, 2014b:2). The first level postulated by Kohlberg is preconventional morality. McLeod (2011:1) explains that most 9 year olds and younger do not have a personal code of morality, but the moral code is shaped by the standards of adults and the consequences of following or breaking their rules. Similar to Piaget's first stage of heteronomous morality, at the pre-conventional level individuals do not have a personal code of morality. Authority is outside the individual and reasoning is based on the physical consequences of actions (McLeod, 2011:1).

The second level of Kohlberg's theory of moral development is conventional morality which includes most adolescents. For most adolescents and adults, moral decision making is based on social norms or maintaining social order in respect of what is expected by others (Matlala, 2011:44; Kail, 1998:310). Similar to Piaget's second stage of autonomous morality, adolescents start to internalise the moral standards of valued adult role models, for example, and reasoning is mostly based on the norms of the group to which the person belongs (McLeod, 2011:2). According to Kohlberg, stage three of this level is characterised by maintaining good interpersonal relationships. The adolescent may think that he/she has to be good in order to be seen as being a good person by others. Moral decisions are thus based on whether or not their decisions would win the approval of those people whose opinions matter to them such as peer groups (Oswalt, 2010:1).

The moral judgments in stage four of conventional morality are characterised by maintaining social order. Most adolescents become aware of the wider rules of society, so their moral judgments are based on obeying rules in order to uphold the law and to avoid guilt (McLeod, 2011:2; Santrock 1998:310).

Kohlberg postulated that post-conventional morality (level three) is the last level of moral reasoning. Individual moral judgments are based on self-chosen principles and moral reasoning is based on individual rights and justice (McLeod, 2011:2). Stage five of this level is therefore characterised by maintaining a social contract and individual rights. The individuals, mostly adults, become aware that, while rules or laws might exist for the good of the greatest number, there are times when they will work against the interest of particular individuals. The individual thus adheres to a social contract when it is valid (MacLeod, 2011:2).

Stage six of post-conventional morality is based on universal ethical principles. People at this stage have developed their own set of moral guidelines which may or may not fit the law. The person will be prepared to act to defend these principles even if it means going against the rest of society in the process and having to pay the consequences of disapproval and/or imprisonment. Kohlberg indicated that few people reached this stage (Bergin & Bergin, 2012:355).

It can be surmised that most adolescents' moral judgments are based on autonomous morality as postulated by Piaget and conventional morality as sculpted by Kohlberg, meaning that their moral decision making is primarily influenced by the expectations of other people, especially of peers.

2.6.2 The influence of moral development on teenage pregnancy

Cognitive development is a gradual process that extends to adulthood; hence many adolescents face challenges or limitations in moral decision making, especially those involving their sexual behaviour (Arnett, 2013:61). Sigelman and Rider (2012:45), for instance, contend that young adolescents may still be in the concrete stage of cognitive development, which means that they may still be living in the here and now. It means that when adolescents are mainly concrete in their reasoning, the more abstract nature of morality becomes very problematic to understand. Many adolescents may thus have short term goals that are more likely to maximise immediate pleasure that includes sexual acts (Reyna & Farley, 2006:1). It implies that the adolescents may find it difficult to come up with sound moral decision making especially pertaining to their sexual acts. The wide range of consequences associated with pregnancy may not be apparent to adolescents to promote moral responsibility which could delay sexual acts. Hence adolescents may indulge in inappropriate sexual acts that may cause pregnancy. Adolescents are not fully-fledged formal

operational thinkers, which implies that they may not be able to see far in the future and be able to make moral decisions that could delay sexual acts (Woolfolk, 2010:235; Santrock, 2008:46). Welton (2011:2) explains that adolescents are also generally more impulsive than adults, implying that they can be erratic in their thinking and moral decision making. Adolescents are psychologically less mature than adults, and this immaturity impairs their judgments and decision making (Bednar & Fisher, 2003:607). Reyna and Farley (2006:44) explain that when behavioural inhibition is required for good outcomes such as delaying sexual acts to achieve long term goals, adolescents are likely to reason more poorly than adults partly because of cognitive limitations. It means that their sexual decision making may not be based on moral responsibility; hence they may indulge in early sexual acts that can lead to pregnancy.

Social circumstances can also influence adolescents' moral decision making that can affect their sexual behaviour. Choudhury et al. (2006:165) assert that moral development involves the formation of values on which to base decisions concerning right or wrong. Both Piaget and Kohlberg claimed that moral development entails the development of moral reasoning which includes embracing values and norms (Albert, Chein & Steinberg, 2013:114). Each society develops its own set of norms and standards for acceptable behaviour, which implies that morality is also culturally conditioned (Dietrich, 2010:1; Cauffman & Steinberg, 2000:741; Knoll, Magis-Weinberg, Speekenbrink & Blakemore, 2015:583). It means that different cultures can have different meanings about adolescent childbearing which, in turn, can influence adolescents' sexual decision making. Hunter (2010:13), for instance, explains that there is a general acceptance of teenage pregnancy in African families, which implies that adolescent fertility is valued and thus may influence adolescents to engage in sexual activities to bear children. Vincent (2012:34) also explains the value of fertility in some cultures by asserting that adolescent childbearing is a developmental rite of passage to adulthood. When an adolescent values childbearing in this way it means that the meaning of pregnancy becomes different. To such an adolescent, pregnancy may mean a change in status or a source of prestige, hence they may view pregnancy positively. A positive view about early childbearing creates absence of guilt that may promote adolescent childbearing. Malti (2013:1) also asserts that when an adolescent focuses exclusively on the positive feelings associated with the personal benefit in, for instance, adolescent childbearing, it may contribute to decision making that leads to adolescent sexual acts for the sake of falling pregnant. Woolfolk (2010:99) explains that making moral choices involves more than

reasoning because the sociocultural contexts of adolescents can influence adolescent decision making.

Peer pressure can also negatively affect adolescents' moral decision making. Albert et al. (2013:114) assert that research has suggested that it is in adolescence that an individual starts to spend an increasing amount of time with peers. Erikson theorised that identity formation during adolescence is achieved by emotional disengagement from the family and a transfer of attachment to peers (Bednar & Fisher, 2003:607). Most adolescents operate on Kohlberg's conventional moral reasoning in which decision making is based on social norms or maintaining social order in respect of what is expected by others (Matlala, 2011:44). Piaget, on the other hand, postulated that at about eleven years and above individuals start to reason at the level of autonomous morality where they consider the approval of other people in their decision making. It means that many adolescents take special notice of what is expected of them by peers. They are more susceptible to the influence of peers in their decision making, especially about sexual matters. They may fear disapproval from their peers and indulge in sexual acts that may make them vulnerable to early pregnancy.

Emotions can also influence adolescent moral decision making. Malti (2013:1) asserts that emotions shape the landscape of human beings' social and moral lives. What adolescents feel is likely to influence how they think about situations, including their sexual behaviour. Krettenauer, Colasante, Buchmann and Malti (2014:583) reiterate that adolescents' emotions in the context of moral decision making have been shown to predict actual behaviour. Emotional instability of an adolescent can encourage adolescents to make sexual choices impulsively (Woolfolk, 2010:99). Emotional instability of an adolescent can be instigated by factors such as social deprivation and inequalities. Low socioeconomic status of adolescents, for instance, promotes social inequalities that can affect their emotional wellbeing. Inadequate resources such as low family income, for example, may affect an adolescent's emotional wellbeing. In this regard pregnancy may have a completely different meaning to such an adolescent like to secure economic support from an economically advantaged male partner. As a result, the adolescent may succumb to sexual activities that can lead to pregnancy.

Cognitive, social and emotional contexts, among others, are therefore factors that can influence adolescent moral decision making in unique and meaningful ways. As adolescents' cognitive, emotional and social development continue to mature, their understanding of

morality expands and their behaviours become closely aligned with their values and beliefs (Dietrich, 2010:1). Values and beliefs influence adolescents' decision making and their general perceptions of pregnancy. Moral judgment or decision making, according to Cauffman and Steinberg (2000:741), is thus neither exclusively cognitive nor psychosocial, it is the by-product of both sets of influences.

2.6.3 The effects of teenage pregnancy on moral development

Teenage pregnancy can have an impact on the moral development of teenage mothers, their children and other adolescents in general. According to Mkhwanazi (2010:347), teenage mothers are more likely to have a second child while still a teenager. The implication is that puberty, when coupled with pregnancy, seems to promote immorality by loosening restraints on problem behaviours hence the likelihood of repeated pregnancy (McDevitt & Ormrod, 2010:162). It also implies that, when a female adolescent falls pregnant, a pattern is thus set for immoral behaviour which encourages inappropriate sexual practices that can lead to more pregnancies.

Research also indicates that teenage pregnancy interrupts the line between adult and child. In other words, when an adolescent falls pregnant she can start to assume adult roles. The teenage mother may start to view herself as an adult hence she may adopt adult roles that include engaging in sexual acts that can lead to repeated pregnancies. The fact that an adolescent is already a mother can thus influence her to disregard certain moral values. She may practise promiscuity, a manifestation of immoral behaviour, thus making her prone to even more pregnancies.

Teenage pregnancy can also have negative influences on the moral development of adolescents' children especially when one considers that the children of teenage mothers experience high rates of educational failure, delinquency and early sexual activity (McDevitt & Ormrod, 2010:162). The implication is that many adolescent mothers are not able to raise children with good morals because of their young age, poverty and sometimes from lack of support from the fathers of their children. On the other hand, adolescent mothers are more likely not to pursue their education and thus in most cases fail to secure gainful employment that can assist in supporting their children. According to research, children of parents with low educational attainment, occupation, and income are more likely to have sex at an early age, not to use contraception consistently and to become pregnant or cause a pregnancy (McDevitt & Ormrod, 2010:163; Leppert, 1984:65). The implication is that teenage

pregnancy promotes a vicious cycle of poverty and immoral behaviour of both teenage mothers and their children (Mkhwanazi, 2010:347).

Research also indicates that preschool children of teenage mothers tend to show some delay in cognitive development, more behaviour problems and more aggressive behaviour than children of older mothers. According to Piaget and Kohlberg's theories of moral development, cognitive development runs parallel to moral reasoning, thus if teenage pregnancy can delay cognitive development in children it means that it may also delay their moral reasoning. Teenage pregnancy can thus promote immorality and problem behaviours such as early sexual acts that can result in pregnancy.

The high rates of teenage pregnancy, according to Bandura's social cognitive theory, promote observation, modelling, and imitation of inappropriate sexual practices especially during peer interactions and thus it can impinge on positive moral development. Jewkes et al. (2001:733) assert that for most of South Africa age of marriage is relatively late, premarital sexual activity is the norm and premarital childbearing and impregnation are socially accepted, signifying a state of immorality that can not go unabated.

2.7 ADOLESCENT CONTRACEPTION

2.7.1 An overview of contraception

The developing female adolescent often faces challenges in pregnancy prevention such as psychosocial barriers to contraception, for example, the limitations of accessing contraceptives from health caregivers. The contraception practices by an adolescent occur within the immediate surroundings of the microsystem. The success or failure of contraception may be attributed to the characteristics of the individual such as her/his self-efficacy about contraception (Berk, 2005:23).

Contraception is the intentional prevention of conception through the use of various devices, sexual practices, chemicals, drugs or surgical procedures (Stacey, 2014:1). In other words, it is the deliberate use of artificial methods or other conscious techniques to prevent pregnancy as a consequence of sexual intercourse (Kilby, Laris & Rolleri, 2007:206; Santelli, Lindberg, Abma, McNeely & Resnick, 2000:156). A synthesis of these views shows that something or some behaviour becomes a contraceptive if its purpose is to prevent impregnation. It is a deliberate or intentional act partly because it is mostly preplanned or done consciously for the purpose of preventing conception.

The prevention of conception can be done using artificial or natural means. The major forms of artificial contraception include barrier methods, of which the commonest is the condom or sheath; the contraceptive pill, which contains synthetic sex hormones which prevent ovulation in the female; intrauterine devices, such as the coil, which prevent the fertilised ovum from implanting in the uterus; and male and female sterilisation, among others (Kilby et al., 2007:207; Brown, Guthrie & Eur, 2010:197). There are also some variations of natural contraception methods that include avoiding sexual intercourse on fertile days. It involves scrutinising what time during the month one can have sexual intercourse with reduced risks of pregnancy. The calendar method, for example, emphasises abstaining from sexual acts during the week a woman is ovulating, and the temperature method pinpoints days of ovulation in which one should avoid sexual intercourse (NHS Choices, 2011:1; Marcola, 2006:1). The withdrawal method is also a natural means of contraception which involves withdrawal of the penis before ejaculation (NHS Choices, 2011:1).

The main purpose of contraception is to help women plan if and when they want to have a baby. However, Rubin, Davis and McKee (2013:130) declare that, despite high contraception use, adolescents' pregnancy rate is one of the most elevated in the industrialised world. Brown et al. (2010:197) assert that, despite contraceptive distribution in schools, many out of wedlock pregnancies still occur. In other words, many adolescents are still falling pregnant although information about contraception as well as contraceptives are available to them worldwide. Brown et al. (2010:197) also contend that teenagers are having sex, regardless of what they are told about the importance of delaying sexual acts, implying that they have different views about adolescent sexual acts. Biello, Sipsma and Kershaw (2010:279) also contend that what causes teenage pregnancy is sexual intercourse, but with today's birth control options it is appropriate to ask why teenagers have sex without preventing pregnancy.

2.7.2 The influence of adolescent contraception on teenage pregnancy

According to Bandura (1977:191), a person's attitudes, abilities and cognitive skills compromise what is known as a person's self-system. This system plays a major role in how individuals perceive situations, and how they behave in response to different situations, including contraception. Self-efficacy plays an essential part in promoting the self-system of an individual (Bandura, 2001:10; Bandura, 1977:191). Self-efficacy refers to an individual's belief in his/her capacity to execute behaviours necessary to produce specific performance attainments (Bandura, 1977:25; Bandura, 1986:15). According to Bandura's (1994:71) social

cognitive theory, all people can identify goals they want to accomplish and things they would like to achieve but putting these plans into action is not simple since it requires high levels of self-efficacy. Self-efficacy, in Bandura's view, plays a pivotal role in how goals, tasks and challenges are approached (Bandura, 1994:71). Self-efficacy can, for instance, influence a person's ability to predict the outcome of events. According to Bandura (1986:15), predictions about possible outcomes of behaviour are critical for learning because they affect goals, effort, persistence, strategies and resilience. In other words, if a person predicts the success of a task he/she is likely to persist in that task to ensure that it succeeds. According to Landers, Friedrich and Miller (2015:585), nonpregnant adolescents, for example, have higher self-efficacy beliefs about pregnancy prevention than those adolescents who fall pregnant.

According to the social cognitive theory, there are several sources of self-efficacy and they include vicarious experiences, encouragement, informational feedback and useful guidance from trusted sources (Bandura, 1994:71; Biello, Sipsma & Kershaw, 2010:279). Vicarious experiences include seeing other people succeed on a task or reach a goal that is similar to what an individual aims to achieve. In so doing the individual develops a belief or self-efficacy that he/she can also achieve. Adolescents, for instance, may be reinforced to use contraception especially when they believe other adolescents are succeeding in pregnancy prevention. Encouragement on one hand boosts one's self efficacy by spurring an individual to continue to engage in a task. An individual is likely to continue to engage in a task if he/she is motivated or supported to do so by others. For example, encouragement by significant others such as mothers and health personnel can motivate adolescents to continue to use contraceptives.

Avoiding unwanted pregnancy can be a major task for a female adolescent and thus may require a high level of self-efficacy to succeed. Contraception is one major way of avoiding unwanted pregnancies but many factors negatively affect female adolescents' effective use of contraceptives. Many female adolescents continue to face intimidating psychological, physical and social barriers that interfere with responsible contraceptive behaviour such as anti-contraception beliefs in some families and communities; hence they become vulnerable to teenage pregnancy (Biello et al., 2010:279). Many families and communities do not allow adolescent sexuality and they also preach the ideal phenomenon of abstinence before marriage which many female adolescents fail to observe. Such psychosocial barriers can promote irresponsible sexual encounters by promoting sexual acts without protection. Motsomi, Makanjee, Basera and Nyasulu (2016:120) explain that many parents do not feel

comfortable talking openly about sexual matters let alone discussing contraception with their teenagers. It is partly because some parents believe that if they encourage contraception they in turn promote adolescent promiscuity. As a result, many female adolescents may fear to embark on effective contraception practices without parental approval. A teenager who is anxious and ambivalent about sex finds it uneasy to acquire and use contraception, while an adolescent who is emotionally more at ease about sex is more relaxed about obtaining and using birth control (Brown et al., 2010: 198; Stacey, 2014:1). It means that if parents are not comfortable to discuss contraception with their teenagers, then such teenagers may not be emotionally ready to use contraception.

Lack of confidentiality of contraceptive use by adolescents is also a psychosocial barrier to effective contraception (Kollar, 2000:56; Mbambo, 2009:21). Contraceptive practice requires adolescents to acknowledge their sexuality, especially to health service providers; hence they may find it difficult to access contraceptives freely. Acknowledging one's sexuality may mean that the adolescent has to be bold enough to acknowledge that she is sexually active and therefore requires contraceptives to avoid pregnancy. Kollar (2000:54) explains that the use of health services is in part an admission of being sexually active. Hence it arouses fears of being punished by family members and ridicule by peers thereby negatively affecting the adolescents' ability to seek out services. Plummer (2012:85) also notes the unfriendly clinical environments in some communities where health service providers do not attend to female adolescents' contraceptive needs positively. Some health service providers have negative attitudes towards adolescent sexual acts, let alone the use of contraception by adolescents, hence female adolescents may find it difficult to access contraception from such threatening health service providers. The primary reason that adolescents may hesitate or delay obtaining contraceptive services may be their concern about lack of confidentiality with service providers (Pediatrics, 2007:1135). They may fear that their sexual acts may be made known to the public. Adolescents may also find it difficult to regularly consult doctors or visit health services for fear of being noticed, especially by their parents. As a result, they may use ineffective contraception or may engage in sexual acts without protection, making them vulnerable to unwanted pregnancies. The purchase of contraceptives over the counter may also be more difficult for those adolescents finding it difficult to acknowledge their own sexual activity or accepting that they are sexually active (Brown et al., 2010:197). It means that lack of assurance of confidentiality, especially in health service institutions, can be a barrier to adolescent contraception. Lack of confidentiality, in Erikson's view, impinges on

the female adolescent's self-efficacy to persist in contraceptive use; hence they become vulnerable to pregnancy.

Some female adolescents can also develop negative attitudes towards contraception and may engage in sexual acts without adequate protection (Chandra-Mouli, Mccarraher, Phillips, Williamson & Hainsworth, 2014:2). This negative attitude to contraception is also a powerful psychological barrier to adolescent contraception. In Bandura's view, a negative attitude can affect a person's self-efficacy. An adolescent with negative attitudes towards contraception, for example, becomes unwilling to accomplish the task of contraception. Voydanoff and Donnelly (1990:46) explain that adolescents with favourable attitudes towards contraception are likely to be effective users, while those who believe that various methods are unsafe or unpleasant are unlikely to use birth control. Negative attitudes may partly be based on the understanding that some artificial contraception methods may have side effects in the long run. Potential adverse effects of some contraception methods include weight gain, headaches and delayed return to fertility (Pediatrics, 2007:1135). Voydanoff and Donnelly (1990:46) assert that female adolescents with negative attitudes to contraception are most likely to consider unsafe methods of contraception such as withdrawal; hence they become vulnerable to unwanted pregnancies. Consistent use of any contraceptive method thus remains a challenge for most adolescents who face psychosocial barriers to contraception (Pediatrics, 2007:1135).

Inadequate knowledge and skills about contraception can cause female adolescents to engage in sexual acts without adequate protection from pregnancy. Voydanoff and Donnelly (1990:46) posit that, although basic knowledge about reproduction is fairly widespread, some teenage girls grossly underestimate their ability to become pregnant. Kail and Cavanaugh (2007:350) contend that some adolescents have misperceptions about the likelihood of falling pregnant. For example, some teenage girls may believe that they cannot get pregnant because of their age or the infrequency of intercourse and as a result they may engage in sexual acts without protection (Chandra-Mouli et al., 2014:3; Voydanoff & Donnelly, 1990:46). Chandra-Mouli et al. (2014:5) also assert that, because of poor understanding of how contraceptive methods work and how they should be used, adolescents may use them incorrectly. According to Chandra-Mouli et al.'s (2014:5) findings, some adolescents reported that they took the pill when they knew their boyfriend was coming, thereby showing poor understanding of how contraceptive pills work. As a consequence, they became susceptible to early pregnancy. Some female adolescents may also develop unfounded faith

in the reliability of their chosen method of birth control, such as withdrawal, and yet such methods may not be that reliable. Female adolescents' misunderstandings about contraception which may emanate from their lack of knowledge of reproduction especially can thus drastically increase their chances of unwanted pregnancies.

Inaccessibility and unaffordability of some of the contraceptives negatively affects female adolescents' contraceptive practice (Kollar, 2000:1; Mbambo, 2009:20). Voydanoff and Donnelly (1990:46) assert that national statistics suggest that those teenagers who use a contraceptive method are most likely to choose methods that are easily obtained and inexpensive. Condoms, for instance, are easier to obtain and inexpensive but they may not be the most effective method of birth control. Kail and Cavanaugh (2007:350) assert that some teenagers do not know where to obtain contraceptives, while others are embarrassed or unable to buy them probably because of lack of funds. Such physical barriers to contraception can hinder female adolescents from effectively protecting themselves during their sexual acts, hence they may fall pregnant.

Age and cognitive development of adolescence can also impair female adolescents' ability to practise effective contraception. Contraceptive methods that require thinking ahead and systematic usage, such as oral contraceptive methods and long acting hormonal methods such as injectable hormonal contraception, are particularly inappropriate for those who have not developed the tools of analytical thinking (Rubin, Davis & McKee, 2013:1; Plummer, 2012:85). Voydanoff and Donnelly (1990:46) explain that those making decisions about sexual activity and contraception must be able to consider the possible consequences of their actions for these decisions to be informed and rational. In other words, for a person to effectively practise contraception she should be cognitively mature to see the long term benefits of contraception and the consequences of ineffective contraceptive usage. But, according to Elkind's (1967:5) views of adolescent egocentrism, many adolescents are self-centred and have an unrealistic view of the world. The adolescents, according to Elkind (1967:5), may have a sense of invulnerability to pregnancy and thus see no reason for contraception. So they may engage in sexual acts without protection thereby making them vulnerable to pregnancy.

Cultural barriers can also influence female adolescents' unpreparedness for safe sexual encounters (Brown et al., 2010:197). Swisher, O'Neill and Leone (1994:107) assert that most adolescents, for instance, believe that it is morally not right to be prepared for casual sex as it

may portray promiscuity. As a result, they may end up having unprotected sex that makes them vulnerable to pregnancy (Swisher et al., 1994:107).

Female adolescents are not effective contraceptive users because of the challenges they face. Most families and society in general do not condone adolescent sexual acts; hence female adolescents encounter psychosocial barriers to contraception. Most adolescents are also unable to meet the financial obligations of sexual acts which include the ability to afford contraceptives. Many adolescents may not be able to comply with the requirements of some contraceptive methods; hence they may become inconsistent contraceptive users. It means that most of these challenges expose female adolescents to the likelihood of unwanted pregnancies.

2.8 CONCLUSION

This chapter discussed the development of female adolescents and its influences on teenage pregnancy. As female adolescents develop physically, emotionally, psychologically, socially, cognitively and morally they develop different perceptions about the phenomenon of teenage pregnancy. The major factor that contributes to teenage pregnancy, and is shown out almost consistently in all developmental stages, is immaturity of the female adolescents that affects their perceptions of teenage pregnancy.

Adolescents, for instance, may have cognitive limitations that cloud their judgments of the real consequences of their sexual acts. In most cases they do not consider their choices explicitly and as a result they fail to make rational decisions when confronted with sexual challenges. Adolescents are not ready or mature enough psychologically and emotionally to verbalise the heightened sexual desires associated with puberty, hence their perceptions of pregnancy can be affected, leading to early pregnancy. Most female adolescents also lack the social skills and maturity to counteract the sexual advances of older males especially; hence they are often persuaded to engage in sexual acts that can result in pregnancy. Although adolescence is a period of tremendous moral development, adolescents lack adequate knowledge to evaluate their actions (values clarification is lacking) especially when it comes to sexual decision making such as contraception. Even though most adolescents reach the formal operations stage where they are expected to develop higher levels of moral reasoning, they tend to regress in reasoning when confronted with new experiences such as sexual challenges; hence they become vulnerable to early pregnancy.

Whilst immaturity of the adolescent is a major influence of teenage pregnancy, the adolescent perceptions of pregnancy can also be affected by the contexts in which adolescents develop such as family, school and community contexts. Peer pressure, for instance, can influence an adolescent to fall pregnant which may be an indication of the influence of the social environment. On the other hand, the adolescents who fall pregnant act as models of inappropriate sexual behaviour especially to other learners in schools, hence many adolescents engage in sexual acts that lead to pregnancy by following/allowing peers to pressure them into inappropriate sexual acts.

Pregnancy also has special implications for each stage of adolescence. In other words, adolescent development and teenage pregnancy have bi-directional influences. Teenage pregnancy affects adolescent development mainly because the sudden change in status from being a child to a mother brings other problems in the female adolescent's life and development such as ill health, social exclusion and immorality. When pregnancy occurs during adolescence, the teenager parent is forced to negotiate the tasks of multiple developmental stages simultaneously, in other words, adolescent development and the development of pregnancy together. Unfortunately, the psychological resources that are developed during adolescence and that facilitate an individual's ability to cope with parenthood are not yet established, hence adolescent development may be affected. The next chapter will look at the broader perspective of Bronfenbrenner's bioecological theory (i.e. mostly macrosystemic factors) to discuss how they influence the perceptions of adolescents about teenage pregnancy. The perceptions of teenage pregnancy and its consequences will also be dealt with in the next chapter.

CHAPTER THREE

PERCEPTIONS OF TEENAGE PREGNANCY AND ITS CONSEQUENCES

3.1 INTRODUCTION

The concern over the age at which a young woman should give birth has existed in the annals of history of many cultures partly because of the profound impact teenage pregnancy can have on the lives of the adolescent mother, her child, family and community (Cherry & Dillion, 2013:1).

Teenage pregnancy is defined as pregnancy in human females under the age of 20 at the time that the pregnancy ends (Woolfolk, 2010:78). According to Langham (2015:1), teenage pregnancy occurs between 13 and 19 years of age, however there are girls as young as 10 who are sexually active and occasionally become pregnant. It means that pregnancy can even occur before the teenage years. Nyakubenga (2009:2) contends that “pregnancy is a physiological process, presenting with for instance missed periods, fatigue, breast enlargement and tenderness, abdominal distension, nausea and vomiting together with light headedness”. When these symptoms appear at the age of 19 or below they are also an indication of adolescent pregnancy. Although any pregnant woman may undergo most of the physiological processes of pregnancy outlined by Nyakubenga (2009:2), teenagers are less ready for their pregnancies than older women mainly because of bodily/physical and emotional immaturity, and therefore experience the symptoms of pregnancy more intensely (Owens, 2002:514). Moore and Rosenthal (2006:2) posit that adolescence (i.e. pubertal period) is a critical period in the upsurge of sexual drives and the initiation of sexual behaviours, so if pregnancy is imposed on top of such a critical period characterised by psycho emotional instability, adolescents experience many challenges.

Freud (1953:218) emphasises the power of sexual instincts, especially in adolescents, by declaring that human civilisation rests upon two pillars, of which one is the control of natural forces and the other the restriction of our instincts. In Freudian view, if sexual instincts and other biological forces are not treated with care, especially by adolescents, serious consequences such as unintended pregnancies may result. The area of concern is that adolescent psychological/emotional development frequently lags behind physical development, thus many of the adolescents fail to restrain their sexual instincts and thus may fall pregnant. It is especially important therefore that the adolescent be able to integrate her

sexual feelings, needs and desires into a coherent and positive self-identity in order to avoid the unforeseen circumstances of pregnancy. Many adolescents are unable to control and deal with their biological forces in a socially satisfactory or constructive manner, hence they can fall pregnant. In Freudian terms, the superego which controls the id is not adequately developed to master instinctual tension (sexual drives) (Parker & Aggleton, 2007:27), hence many adolescents become susceptible to inappropriate sexual acts that can lead to teenage pregnancy.

Although Freud (1953:218) emphasises the influence of biological forces within the individual, there are also many other internal and external forces influencing adolescents' sexual behaviours, as well as their perceptions and meanings of teenage pregnancy in particular. With reference to Bronfenbrenner's (1979:22-23) bioecological theory, the female adolescents develop within a system of relationships that form their environments. The social world of adolescents is part of a system of nested contexts that are linked in dynamic interaction throughout the life course of the individual such as the microsystems, mesosystems, exosystems, macrosystems and chronosystems. A major assumption of Bronfenbrenner's (1979:22-23) bioecological theory is that various subsystems (family, school, economic conditions) of this ecological scheme change over the course of the person's development influencing thoughts, feelings and behaviour. It is a complex set of changes influencing the individual adolescent's physical, cognitive, social, emotional and moral development, as discussed in chapter two.

However, change can also originate in the external context of the female adolescent. This chapter will look at subsystems outside of the female adolescent such as globalisation, culture, socioeconomic conditions, social networks, media and technology, as part of the macrosystem, which also influence perceptions and behaviours of adolescents. According to Bronfenbrenner's (1979:22-23) bioecological theory, such changes create dynamic interactions between the adolescent and the environment, instigating changes in the female adolescent's perceptions of teenage pregnancy and its associated consequences.

In view of Bronfenbrenner's (1979:22-23) bioecological theory, whatever the origin of change, the critical feature is that the changes alter the existing relationships between the adolescent and the environment. It implies on the one hand that teenage pregnancy, a significant change in the adolescent world, can affect the female adolescent's relationships with the environment in the present and future. Teenage pregnancy, on the other hand, can

affect other layers of the ecological systems such as the family and society. This chapter thus looks further at the consequences of teenage pregnancy in the personal, family and community contexts as well as the broader society.

3.2 INFLUENCES ON THE PERCEPTIONS OF TEENAGE PREGNANCY

Teenage pregnancy is a problem which needs an ecological approach in combating it (McLeod, 2009:223). Parke and Clarke-Stewart (2011:11) concur with McLeod's (2009:223) assertions by explaining that, to understand behaviour, scientists must view it as occurring in a particular setting and as having adaptive or survival value. The female adolescents' behaviours, perceptions and meanings of teenage pregnancy can thus be better understood when we pay particular attention to the ecological subsystems, contexts or social circumstances in which they develop.

Bronfenbrenner (1979:3) stresses that the development of individuals takes place in a variety of contexts or systems that extend from the immediate physical environment of the individual to society in general. The contexts already mentioned in chapter two (refer to figure 2.1), as noted by Bronfenbrenner, are best viewed as concentric networks of five interrelated systems, namely, the microsystem, mesosystem, exosystem, macrosystem and chronosystem (Matlala, 2011:104; Vleet, 2011:1; Ben-David, 2011:32). In the previous chapter, focus was on the influences within the microsystem. Particular attention was paid to the influences in which the female adolescents are directly involved such as the physical, social, psychological/emotional, cognitive and moral developmental influences of the adolescents.

The subsystems discussed in this chapter are mostly at the macro level where the female adolescents are not actively involved and their thoughts, perceptions and feelings are indirectly influenced. The subsystems to be discussed include influences from perceptions of globalisation, culture, socio-economic status, media and social networks on teenage pregnancy and its consequences. In accordance with Bronfenbrenner's (1979:3) bioecological theory, the above subsystems can be classified as subsystems of the macrosystem, exosystem and chronosystem. However, some of the subsystems may belong to more than one system.

Culture, globalisation and socioeconomic status, for instance, can be viewed as subsystems of the macrosystem. It is probably because, according to Bronfenbrenner (1979:4), the macrosystem includes the ideologies, attitudes, mores, customs and laws of a particular culture. Ben-David (2011:64) contends that the macrosystem encompasses the total culture in

which the community lives, the patterns, traditions, beliefs and mores and all the other traits and pursuits that are endemic to a group of people and that are passed on from one generation to another. Cultural contexts including developing and industrialised countries, socioeconomic status, poverty and ethnicity are part of the macrosystem (Kostelnik, Gregory, Soderman & Whiren, 2012:13; Matlala, 2011:108).

Socioeconomic status can be viewed as a subsystem of the macrosystem because socioeconomic groups may develop certain perceptions or beliefs that indirectly have a bearing on the adolescents' development. For example, low socioeconomic groups may feel deprived and this mindset will influence how they behave and think. They often feel that they cannot escape their fate and will not do anything to get out of the poverty cycle. More affluent people will transfer more positive values to their children like educational and career prospects.

Globalisation is also a subsystem of the macrosystem because it entails enmeshing or bringing together diverse cultures at a global scale (Zembar & Blume, 2009:412). In other words, different customs, values and beliefs of different cultures can be shared through globalisation, implying that adolescents' behaviours can also be influenced through exposing them to the diverse values of other cultures. It means that globalisation facilitates the creation of a global culture by interconnecting people at both local and international levels.

Socioeconomic status, social networks, media and technology can be viewed as part of the exosystem. The exosystem consists of settings that do not include the adolescent but that affect the child indirectly such as the workplace of parents, mass media, community health services and welfare services, magazines, books, radio, movies, computers, television, internet and social networks (Matlala, 2011:104). Socioeconomic status plays a role when taking the workplace of parents into consideration because the workplace will determine the socioeconomic status of the family as it provides income and resources (whether poor or wealthy) that affect the adolescent indirectly. The media, such as television and radio, are a subsystem of the exosystem because, although not involving the adolescents directly, are capable of providing models that can influence their behaviour in a positive or negative way. Social networks are part of the exosystem because they are part of the social media that shape the behaviours and perceptions of adolescents.

Globalisation can also be classified as a subsystem of the chronosystem. The chronosystem is the context of time and includes patterns of stability and change in the adolescent's

environment over time (Santrock, 2011:27). Matlala (2011:12) describes the chronosystem by asserting that the normative values of society are undergoing constant change under the influence of historical and social change that influence the life world of the individual and her total context. Globalisation, which is driven by, for example, technological changes in transport and communication, is by its nature associated with social change over time, hence can be viewed as part of the chronosystem. Globalisation, in the context of the chronosystem, can influence the behaviours of adolescents partly because adolescents are not only affected by their current environment but by changes that occur in that environment over time such as technological advancements.

Female adolescents are thus faced with several environmental influences or subsystems of the ecological systems which can alter or shape their perceptions of teenage pregnancy. In other words, the above subsystems or environmental influences are worth discussing since they are capable of influencing thoughts, feelings and behaviours of female adolescents in the present and future. The subsystems (globalisation, culture, socioeconomic status, media and technology and social networks) will also be discussed in the contexts of developmental theories which include Vygotsky's sociocultural, Erikson's psychosocial, Freud's psychodynamic and Bandura's social cognitive theories.

3.2.1 Culture

3.2.1.1 An overview of culture

Culture, according to Bronfenbrenner's (1979:3) bioecological theory, is a component of the macrosystem. Bronfenbrenner (1979:3) declared that there are internal and external contextual influences on the developing adolescent, one of which is the cultural context (external context). Meece and Daniels (2008:452) explain that the macrosystem consists of, inter alia, the larger culture and possibly subcultures in which the individual lives, including traditions and values, nationality, ethnicity, religious affiliation, rural and urban influences. In other words, macrosystems are blueprints for interlocking social forces and their interrelationships in shaping human behaviour (Matlala, 2011:99).

Culture refers to those value systems that are transmitted from generation to generation and represents an integrated pattern of human knowledge, beliefs and behaviours (Owens, 2002:464; Vygotsky, 1978:86; Meece & Daniels, 2008:452). Culture can also be described as that complex whole which includes knowledge, beliefs, art, morals, law, custom, and any

other capabilities and habits acquired by man as a member of society (Slonim, 1991:3; Plummer & Wight, 2011:123). Owens (2002:10) also explains that the culture of any population includes customary ways of behaving and frames of reference that encompass standard ways of living such as expressing affection and getting married. Culture therefore shapes the way of life shared by members of a population. It is the human-made part of the environment which shapes human behaviour. It is a sociocultural adaptation or design for living that people have worked out and continue to work out in the course of their history (Owens, 2002:10). It means that all these imperatives of culture form a kind of cultural world for people of a given society or population and they help shape the adolescents' development. According to Owens (2002:10), culture and adolescent development are thus as inseparable as heredity and environment; each is an expression of the other. In other words, culture expresses human behaviour whilst human behaviour is an expression of culture.

The concepts of culture and society are often used interchangeably but they are not similar. Society is made up of people, their culture and the way they behave, thus society is not culture, but it has a culture or general cultures (Slonim, 1991:4). Culture and ethnicity are also not the same. Diller (2007:16) contends that an ethnic group is any distinguishable people whose members share a common culture and see themselves as separate and different from the majority culture. Diller (2007:16) asserts that, while culture deals with symbolic generalities and universals, ethnicity deals with an individual's sense of identification and provides a sense of belonging to a reference group.

Trommsdorff and Chen (2012:22) explain that the cultural context is interwoven with values, norms, beliefs and meanings. Values, according to Trommsdorff and Chen (2012:8), can be defined as desirable and enduring goals that vary in importance and serve as guiding principles in people's lives. Matlala (2011:35) explains that a value defines what is important, worthwhile and worth striving for, and values vary from culture to culture. Plummer and Wight (2011:123) contend that norms are ideals of behaviour shared by a social group which do not necessarily reflect actual behaviour. Ganly (2010:58) asserts that beliefs are generalisations that people use to give themselves a basis for decision making. In other words, beliefs are what people accept to be true and they can be derived from values, so people use beliefs, values and norms to guide their actions (Ganly, 2010:59). From a social sciences and psychological perspective, values, norms and beliefs are embedded in culture; and they structure, motivate and give meaning to individual behaviour. Owens (2002:464)

asserts that culture imparts meanings to social behaviour and also determines how adults and children perceive and evaluate their behaviours.

Trommsdorff and Chen (2012:8) contend that the values of freedom, honour and justice, for instance, have different meanings in different cultural contexts. For example, giving birth as an adolescent may be acceptable in one culture but can be shameful in another. Mazzarella (2005:166) also explains that culture is the constant process of producing meanings from our social experiences and such meanings produce a social identity for the people involved. In other words, what a person values defines his/her reference group.

Diller (2007:40) explains that each culture, through its differences (in language, values, personality and family patterns, worldview, sense of time and pace or rates of interaction), generates a phenomenologically different experience of reality. Culture therefore embodies people's philosophy, worldview and behaviour patterns (Afolayan, 2004:200; Chambers, 2008:113). The culture into which a person is born and socialised thus defines the dimensions of his or her personal paradigm.

A culture has common patterns of communication and language unique to a group (Diller, 2007:40). The communication style of a culture, for instance, involves more than just verbal conversation. It also includes patterns and aspects of non-verbal communication like body language and emotional expressions. The actual content or subject matter of communication is also usually determined by cultural norms (Afolayan, 2004:200). It means that adolescents quickly learn, for example, which subjects are taboos and which topics are sensitive in their culture. For instance, sexual matters are normally sensitive to talk about especially in African cultures, which is the focus of this study.

Smetana (2011:96) posits that there are two major global dimensions of cultures which can affect worldview, namely individualism and collectivism. Smetana (2011:119) explains that collectivist cultures predominate in much of Asia, South America and Africa, whilst individualistic cultures form part of the USA and most of Western Europe. Individualistic cultures emphasise personal goals at the expense of collective goals or group goals, whilst collectivist cultures emphasise interdependence (Smetana, 2011:119). In other words, collectivist and individualistic cultures differ in how the self is conceptualised. It means that the self of the adolescent is defined as independent in individualistic cultures, whilst the self (of the adolescent) in collectivist cultures is defined as interdependent.

Cultural factors thus affect what specific values and beliefs are endorsed by adolescents in the society and how value systems direct their beliefs, decision making and actions, particularly about sexual matters (Trommsdorff & Chen, 2012: 6). Kelly (2001:6) explains that culture profoundly affects, for instance, how people perceive love, how susceptible they are to falling in love and with whom. The sexual attitudes and behaviours of individual human beings are thus shaped by the surrounding cultural imperatives (Kelly, 2001:6). According to Diller (2007:16), culture is therefore the glue that gives shape to life experience, promoting certain values and experiences as well as defining what is possible.

3.2.1.2 The influence of African culture on teenage pregnancy

Seeing that this study comprises perceptions of African female adolescents, the main culture which will be discussed, is the African culture with its influence on teenage pregnancy. Vygotsky's (1978:86) sociocultural theory emphasises the impact of culture on human behaviour by explaining that it is not possible to understand a child's development without some understanding of the culture in which the child was raised. According to Vygotsky (1978:86), an individual's thinking patterns are not primarily due to innate (biological) factors but are a product of cultural institutions and social activities such as family socialisation practices. Therefore, the influence of culture on the behaviour of any human being cannot be overemphasised. There are many cultures in the world with diverse traditional beliefs and values, all of which shape adolescent thinking patterns and behaviour. This section however, focuses on the influence of African cultures in shaping adolescent perceptions of teenage pregnancy, because research has shown a prevalence of teenage childbearing in most African communities (Mkwanazi, 2010:358) and the empirical study is about African teenage pregnancy.

Vygotsky's (1978:64) sociocultural theory postulates that learning and development take place in socially and culturally shaped contexts. In Vygotskian view, interactions with adults and peers are essential for cognitive development. Lee and Gupta (1995:13) thus posit that concepts, language, voluntary attention and memory, for instance are functions which originate in culture in the interactions between people. Vygotsky (1978:74) posits that the pattern of social interaction within one's culture determines the structure and pattern of internal cognition, thus all higher mental functions are internalised social relationships.

In the context of Vygotsky's social cultural theory, African adolescents are social beings who are also greatly influenced by the culture in which they live (Rathus, 2006:26). Miles (2000:

49) maintains that adolescents do not exist in a vacuum but change in relation to their everyday social and cultural contexts. In Vygotskian view, the developing adolescents rely on the vast pool of transmitted experiences of others, hence their cultures play significant roles in patterning their experiences (Vygotsky, 1978:64). African adolescents' perceptions of teenage pregnancy are thus affected by, *inter alia*, the customs, traditions, values, meanings, beliefs and heritages of the African culture in which they are raised. The national survey of high school students in America, for instance, revealed that about half the black female sophomores and one fourth of the white adolescents said they would consider having a child out of wedlock. As articulated by Swisher et al. (1994:55), African teenagers are more likely to favour having their first child before age 20, partly because of the cultural value attached to fertility. It implies that there are certain African cultural factors that shape thoughts, feelings and perceptions of female adolescents about teenage pregnancy.

African female adolescents, for instance, will often fall pregnant to prove their fertility. Fertility is a phenomenon that is of great value in most African cultures; hence it commands a lot of respect. According to Hunter (2010:13), there is, for instance, a strong acceptance of teenage pregnancy in many African families in KwaZulu-Natal in South Africa partly due to their high regard for fertility. In other words, African cultures can value fertility to such an extent that it can influence female teenagers to engage in sexual activities to prove their ability to bear children. The value of fertility in some African cultures can force people to believe that a person becomes a real man or a real woman by having a baby, which implies that having a child is a developmental rite of passage into adulthood (Vincent, 2012:34). Hunter (2010:17) also reported that in Limpopo, South Africa, it is culturally wrong for a woman to reach the age of 21 without a child. It does not matter whether you are married or not, you have to have a child to prove you are not barren (Hunter, 2010:17). Hlapa (2006: 17) concurs by asserting that motherhood is an important path to social status and personal achievement in black African cultures, especially because children are widely regarded as a great gift and blessing. In such cultural contexts, pressure to bear children leads to a very narrow and prescriptive understanding of womanhood to the extent that some female adolescents think that if a woman is unable to conceive she is a less of a woman (Hlapa, 2006:17). Most African cultures also strongly believe and value the fact that children continue the family line and preserve property and wealth, hence giving birth may give African female adolescents an elevated status, especially among other peers (Hunter, 2010:20). Most African adolescent mothers also report that it was not an accident that they

did not use birth control, they wanted to have a baby; and they wanted someone to love who would love them back (Hunter, 2010:20). Hence many African teenagers easily succumb to early childbearing.

McLeod (2014:1) explains that, according to Vygotsky, cognitive development stems from guided learning within the zone of proximal development as adolescents and their knowledgeable others co-construct knowledge. In other words, learning is a mediated experience. It implies that through interaction with adolescents, adults transmit their cultural tools of intellectual adaptation that adolescents internalise. However, the communication styles and content or subject matter of communication in African cultures, particularly about sexual matters, leave a lot to be desired. According to Plummer and Wight (2011:129) and Kelly (2001:6), African cultures see sex as a taboo topic for discussion and they mostly view school-based sex education as unacceptable. Misinformation and myths about sex are thus often distributed. Moore and Rosenthal (2006:240) also assert that Black parents, in particular, find it difficult to communicate with their adolescents about sexual matters. It is mostly because adults in most African cultures believe that open discussion of sex and sexuality may, for instance, promote promiscuity. African parents thus rarely provide sexual information to their adolescents and female adolescents lack adequate knowledge about sexual matters such as contraception. Hence African adolescents may become more vulnerable to early child bearing than adolescents of other cultures who may be more open in discussing sexual matters.

In the Vygotskian view, the developing adolescents rely on the vast pool of transmitted experiences of others, hence cultures play significant roles in patterning adolescents' experiences (Vygotsky, 1978:64). In other words, Vygotsky believed that through both informal and formal schooling adults convey to adolescents the ways in which their culture interprets the world. Diller (2007:99) asserts that adolescents raised in African cultures often come from families who attribute most of their problems, such as poverty, to racial discrimination and they also make their children believe that they are victims because they are black. McLeod (2009:221) explains that indigenous groups across Africa, for instance, maintain that they share common experiences, including discrimination, impoverishment, dispossession of land and natural resources, forced conscription and human rights abuses, thus they believe that they are vulnerable groups. In other words, African cultures are mostly characterised by prematurely sensitising their children to racism, oppression and marginalisation before their children are developmentally ready, thereby having an enormous

influence on their children's ability to view the world positively (Diller, 2007:100). Therefore, parents' attitudes toward African race and life in general are passed on to the adolescents. This promotes low expectations for the future, thereby influencing the female adolescents to view childbearing as a viable alternative (Saparker, 2012:2; Minujin & Nandy, 2012:69).

Vincent's (2012:27) research reveals that young women from socially deprived areas are more likely to hold anti-abortion views and will perceive motherhood in a more positive light, even when they are young or unmarried. Poor teenagers, according to Stapleton (2010:18), have fewer reasons to delay childbearing because they believe they have a bleak future and a baby will give meaning to their lives. A baby is seen as a precious gift to love and to love them back. In areas of high social deprivation, teenage pregnancy is thus higher and abortion rates lower, which implies that social deprivation has positive influences on early childbearing.

According to Voydanoff and Donnelly (1990:72), the extent to which adolescents are able to project themselves into the future and to anticipate the consequences of their behaviour is the component of cognitive development called future time perspective. Adolescents who appropriate highly developed future time perspectives are therefore better able than others to project the occurrence of events over their life course like the consequences of their sexual activities. A culture of poverty and deprivation, which may promote low expectations about the future, can thus negatively affect adolescents' future time perspectives which, in turn, can influence their perceptions of childbearing because they may see childbearing as the best option to give meaning to their lives (Derne, 2008:59). Slonim (1991:11) thus explains that adolescents raised in the culture of poverty, including many African cultures, mostly operate in a present time frame, with little or no conception of any future and consequences of behaviour for their future. Slonim (1991:11) explains that most African adolescents who operate in the present tend to have lower educational aspirations because of their perceived uncertainties about their future; therefore, they find fewer reasons to delay childbearing. Bender and Leone (1994:57) explain that the anticipated payoffs of education, for instance, are thought by these socially deprived adolescents to be so limited that early motherhood appears a viable alternative to elevate their social status. It implies that a female adolescent who does not recognise that being a parent will place serious limitations on her future, no matter what her plans are, is unlikely to avoid parenthood (Voydanoff & Donnelly, 1990:72).

Many African cultural environments do not promote what Muss (1990:277) calls the status mobility system of a culture; hence many adolescents find no reasons to delay sexual acts. According to Muss (1990:277), the status mobility system is the socially or culturally approved strategy for getting ahead within a given population or a given society. As adolescents get older and begin to understand or adapt to the status mobility systems of their cultures they themselves tend to play an active role in learning how to get ahead in the manner prescribed by their cultures (Muss, 1990:278). Many African cultures tend to have poor status mobility systems which may influence the adolescents to see limited prospects in life, hence they may find fewer reasons to delay childbearing. When an adolescent sees a lot of prospects in the future, she will more likely find reasons to delay childbearing in order to achieve her goals such as attaining a good education.

African cultures consist mostly of collectivist cultures that emphasise harmonious interpersonal relationships, mutual obligations and interdependence of people in the cultural group, unlike individualistic cultures which emphasise personal goals (Arnett, 2013:13). Although Arnett (2013:13) maintains that adolescent risk taking such as adolescent sexual acts is higher in individualistic countries such as USA, France and Germany than in collectivist ones such as China and India due to increased autonomy, African collectivist cultures have their fair share of influences on adolescent childbearing. Slonim (1991:19) explains that collectivist African cultures have strong roots in their African heritage, the African heritage of kinship bonds and role flexibility. Because of strong kinship bonds, African female adolescents may find nothing wrong in leaving their babies in the care of older members such as grandmothers and aunts, thus it promotes adolescent childbearing by lessening the burden of child care. Parke and Clarke-Stewart (2011:11) also explain that most African cultures have extended families who live together and all family members, as well as members of the village or community, share in child care. Hunter (2010:4) affirms that the availability of parental or grandparental support permits girls to attend school after giving birth. The extra parental support in child care is thus a critical factor that influences African female adolescents not to worry too much about the consequences of having a child. Female adolescents in African cultures can thus fall pregnant, give birth, leave the child in the care of grandparents or aunts and still go to school. Panday et al. (2009:13) also assert that South Africa's liberal policy that allows pregnant girls to remain in school and to return to school post-pregnancy has protected teenage mothers' educational attainment but influences pregnant rates of female adolescents.

The interdependence that characterises most African cultures can also affect the female adolescents' locus of control which, in turn, affects their perceptions of teenage pregnancy. Voydanoff and Donnelly (1990:71) assert that an internal locus of control, for instance, is the extent to which a female adolescent perceives having control over her own life and this characteristic is mainly promoted by individualistic cultures that emphasise independence. In other words, an independent female adolescent who is mostly driven by an internal locus of control is likely to take more responsibility for her actions than an interdependent one who may have an external locus of control. External locus of control is a characteristic prevalent in collectivistic cultures that emphasise interdependence. Voydanoff and Donnelly (1990:71) posit that an external sense of locus of control is thus positively linked to having a child out of wedlock because the female adolescent may not be independent enough to take decisive action to avoid pregnancy such as insistence on condom use to an uncompromising male partner.

Gender inequalities and patriarchal controls associated with African cultures can also influence female adolescents to succumb to early childbearing. Hunter (2010:13) posits that gender inequalities in African cultures impair the ability of young women to make reproductive and sexual health choices freely. Gender inequalities mostly deny the female adolescents the opportunity to express their desires to insist on condom use or refuse to have sex (Hunter, 2010:13; Iliffe, 2005:264). Afolayan (2004:205) affirms gender stereotyping in Black cultures by asserting that the subordinate position of women and their relative powerlessness to control how and with whom to engage in sexual activity is still experienced. Gender inequalities, according to Hunter (2010:13), thus often frame or dictate the experiences of sexual intimacy as a whole and put most African female adolescents in weaker positions to negotiate safe sexual activities. Kail and Cavanaugh (2007:352) also believe that female adolescents of African cultures are often at risk when they adhere to traditional gender stereotypes which often make them believe that sexual coercion is a normal part of romantic relationships. According to Kail and Cavanaugh (2007:352), many African female adolescents are often forced to have sexual intercourse by males they know. It means that female adolescents raised in African cultures can succumb to non-consensual sexual relations that include date rape or acquaintance rape. In this regard African female adolescents become very vulnerable to falling pregnant. The African female adolescents can appropriate gender inequality as a normal practice and thus may not have the same leverage in sexual

negotiations with their male counterparts, thereby making them vulnerable to early pregnancies.

3.2.2 Globalisation

3.2.2.1 An overview of globalisation

According to Bronfenbrenner's (1979:3) bioecological theory, the macrosystem includes the ideological attitudes, mores, customs, and laws of a particular culture. Globalisation, just like culture, is macrosystemic because it brings diverse cultures together at a global scale within the macrosystem.

Globalisation refers to the greater interconnectedness among the world's people. It is an unprecedented compression of time and space reflected in the tremendous intensification of social, political, economic and cultural interconnections and interdependence on a global scale (Eitzen & Zinn, 2006:1; Held, 2004:15; Derne, 2008:19). Giddens (1991:64, in Miles, 2000:49) defines globalisation as the intensification of worldwide social relations which link distant localities in such a way that local happenings are shaped by events occurring many miles away and vice versa. A synthesis of these views shows that globalisation brings diverse people together on a global scale. People with different values, beliefs and norms are interconnected through globalisation. It is the reduction of time and space in a way that events in one part of the world have the potential to influence events in another part of the world in a very short space of time (Rhoads & Szelenyi, 2011:10). Globalisation's association with multiple places and transnational identities are commonplace and individuals may feel closer to family and friends in far places than they do to those in their immediate environment (Yon, 2000:16; Clarke & Thomas, 2006:1). It is a process whereby goods, information, people, money, communication and fashion (and other forms of culture) move across national boundaries (Eitzen & Zinn, 2006:1). Pais (2006:1) acknowledges that globalisation indicates that the world today is more interconnected than ever before.

Technology facilitates globalisation and the pace of globalisation has quickened at the beginning of the 21st century due to advances in technology throughout the world. Derne (2008:20) asserts that today the speed and volume at which people, products, media, information, production and financing move around the globe continues to increase far beyond previous levels due to technological advances in transport, information and communication technologies such as satellite communication. The global media which

include satellite television, for example, has played a significant role in connecting people with a global culture which has global values, beliefs and norms. Alvi, Hafeez and Munawar (2014:105), emphasising the role of the global media in connecting people in the world, posit that the fashions, the trends and the major social and political events taking place in one part of the globe are communicated within a short time to the rest of the world through internet and satellite channels, thus people are more interconnected globally than before. Eitzen and Zinn (2006:4) explain that new technologies such as robotics, fibre optics, consumer ships, computers, communication satellites and internet, for example, have transformed information. Anyone with a computer today is a citizen of the world, because he/she will be interconnected to the rest of the world (Eitzen & Zinn, 2006:4).

Eitzen and Zinn (2006:17) assert that globalisation is a complex set of processes. For example, globalisation has far-reaching social and cultural implications. The speed of movement and communication (via travelling and communication technology) and the dramatic increase in the amount of goods, messages and symbols across borders have not merely made the world smaller, but for many purposes they have made geography irrelevant (Eitzen & Zinn, 2006:17). Advancement in transportation and communication has made distances shorter and communication time has decreased dramatically in such a way that even people who are far apart can interact in no time, making distance and time rather insignificant.

Globalisation has cultural implications because one of the fundamental effects of globalisation on culture is the attraction of more and more people to common consumer lifestyles such as choice of clothing and food. Television influences people of whatever creed, culture, or race to roughly want the same things (Derne, 2008:21). Globalisation is thus homogenising people's experiences and eroding identity and diversity. As people around the world are attracted to cultural icons, styles and meanings that are generated globally, cultures have become disconnected and disembodied rather than being closely tied to time, place and people (Eitzen & Zinn, 2006:17; Afolayan, 2004:4). People's lifestyles across the globe are being unified through globalisation and ultimately coming up with a relatively uniform culture.

Globalisation is not only about what is out there remotely and far away from the individual; it is a phenomenon that affects the personal lives of most people, including female adolescents. Arnett (2013:95) posits that adolescence is a culturally constructed period of life. Since

globalisation creates a global culture, it means that it is capable of influencing adolescents' thinking patterns and behaviour in general. Miles (2000:49), for instance, contends that the young people of today appear to be struggling to come to terms with what it means to be a young person in a changing world. Adolescents do not exist in a vacuum, but also change in relation to globalisation. According to Alvi et al. (2014:103), studies have shown that young people such as female adolescents are the most influenced population by global change as their minds are more receptive to change compared to other segments of society. It means that much of what happens in the daily lives of female adolescents is increasingly influenced by events beyond the local world.

3.2.2.2 The influence of globalisation on teenage pregnancy

Vygotsky's sociocultural theory postulates that human activities take place in cultural settings and cannot be understood apart from these settings (Woolfolk, 2010:43). Vygotsky places more emphasis on social contributions to the process of development. The social environment, like the global environment in which female adolescents grow up, can influence how they think and what they think about (McLeod, 2014:1). Allahyar and Nazari (2012:79) posit that the basic tenet of the sociocultural approach is that human mental functioning is inherently situated in social, interactional, institutional and historical contexts. The adolescent acquires knowledge through contacts and interactions with other people, and gradually assimilates and internalises this knowledge, adding his/her personal value to it (Turuk, 2008:244). In the Vygotskian view, the developing adolescent relies on the vast pool of transmitted experiences of others such as older peers, adults, parents and teachers within their culture but they are also influenced by the wider world and a global culture (Afolayan, 2004:4; Eitzen & Zinn, 2006:1).

Globalisation has sociocultural influences that promote the internalisation of local and global values. The internalised global values in turn influence the perceptions of teenage pregnancy amongst many female adolescents. Sociocultural theorists, for instance, conceptualise learning as distributable, interactive, and contextual and the result of the learners' participation in a community of practice (Harris, 2013:2). In the Vygotskian view, the increased movement of people and communication which characterise globalisation has thus widened and speeded the distribution of global cultural values and beliefs and promoted interactions of people at a global scale. Whilst teenagers grow up in specific cultures with specific values, norms and beliefs, globalisation exposes them to other cultures with other

values through mass communication and technology. Yon (2000:5) reports that globalisation signals the rapid circulation and flow of information, commodities and visual images around the world, hence female adolescents may develop a revised self-image (a global self-image). Teenagers are thus influenced by other cultures and often change their behaviours accordingly because they are at a very vulnerable, impressionable age. According to the Vygotskian view, adolescents focus on cultural contexts of their own as well as global values to become mature.

Salili and Hoosain (2007:xi) posit that globalisation, electronic and digital technology have made it possible for adolescents to come into contact with other cultures in their own living rooms. Cultural contact has increased exponentially by the global mass media, advanced communication systems and information technology (Rhoads & Szelenyi, 2011:4; Salili & Hoosain, 2007:xi), widening the interaction of adolescents with other cultures in the process.

Globalisation promotes the development of a subculture that influences the behaviour patterns of adolescents including their sexual behaviours, attitudes and perceptions of the world. Due to cultural globalisation, the social lens through which female adolescents now view sex has also changed (Moore & Rosenthal, 2006:26). Monahan (2005:4) explains that globalisation influences the blurring of boundaries previously held as stable and fixed under conditions of modernity, hence globalisation enmeshes all individual cultures and institutions in a new world order. The female adolescent is now being re-socialised because some of the values she acquired through identification with her parents are seemingly no longer as relevant and central as before in the global world.

Globalisation promotes independence and freedom of adolescents, especially in sexual decision making, often at variance with traditional values and norms. For example, Kail and Cavanaugh (2007:348) explain that European and American parents tend to encourage independence in their teenagers more than traditional Latino American or most African countries that emphasise family ties and loyalty to parents. Rhoads and Szelenyi (2011:4) assert that while adolescents identify closely with their specific cultures, they are at the same time partners in cultures that circulate globally, hence female adolescents are prone to imitation of certain sexual behaviours of other cultures. According to Kail and Cavanaugh's (2007:349) explanation, dating is a sign of independence (emphasised mostly in western cultures) and usually results in less time spent with family. Increased autonomy in the global world has thus provided more opportunities for sexual activity among adolescents, thereby

increasing chances of early childbearing. It implies that those female adolescents who appropriate independent values from other cultures with minimal restraint are likely to engage in sexual acts.

Globalisation affects family settings and traditional values which, in turn, influence adolescents to indulge in inappropriate sexual acts because, according to Kelly (2001:12), the mobility of our society, along with the decreasing stability of the nuclear family in this global world has created conditions that demand more independence and self-reliance from female adolescents. It means that unsupervised teenagers (because of working parents or single parent households) are likely to be more independent and potential risks like, for instance, engaging in inappropriate sexual activities that can result in early pregnancies may be more rife (Voydanoff & Donnelly, 1990:24).

Globalisation influences adolescents to have different perceptions of premarital sex and the place of marriage. Moore and Rosenthal (2006:7) explain that globalisation and modernity, for instance, have influenced the onset of a sexual revolution which to a greater extent is characterised by more permissive attitudes towards sexuality and greater concern for personal fulfillment. The sexual revolution, which in Vygotskian view is a socially and culturally shaped context, has, *inter alia*, brought with it a lessening of the prohibition of premarital sex (see Basch, 2011:614; Voydanoff & Donnelly, 1990:24). Globalisation also pursues the ideals of democracy such as female emancipation. Female emancipation promotes, among other things, sexual equality which diminishes women's dependency on marriage and on males in general (see Moore & Rosenthal, 2006:111). The freedom and independence of women have, to a certain extent, brought equality in sexual expression between males and females, consequently widening their chances of sexual exploration. Sexual exploration by the still maturing adolescent can make her susceptible to early childbearing. Basic perceptions of the function of sex (which is a marital affair) and the role of women in general have changed, hence more and more female adolescents in this global world are becoming freer in their expression of sexual matters (see Moore & Rosenthal, 2006:111).

Globalisation has thus brought a general shift in the perception of the institutions of marriage and the family is no longer as sacred as it used to be (see Basch, 2011:614). Globalisation has brought social change and surveys indicate there is less of a stigma attached to having children outside of marriage than one or two generations ago, hence more adolescents are prone to early childbearing (see Basch, 2011:614; Kelly, 2001:12).

Globalisation is also partly to blame for promoting an adolescent culture that influences their perceptions of teenage pregnancy. Moore and Rosenthal (2006:115) retort that, influenced by western societies that prolong the transition of adolescents to adulthood and that segregate young people by giving them freedom, globalisation has given rise to an institutionalised youth culture. Moore and Rosenthal (2006:111) assert that the power of the youth culture in shaping teenagers' opinions and behaviours can be recognised when we look around at the conformity of adolescents especially to current fashions in clothes, music, and leisure activities in the global arena. The area of sexuality is thus also subject to the same influence of the global youth culture. Mazarella (2005:4) asserts that adolescents derive much of their information about sexual mores and behaviours from this subculture, which is wider than immediate peers, and can alter the perceptions of adolescents towards early childbearing.

Because globalisation has broken down barriers between different cultures, adolescents have become more susceptible to some of the global values that can cloud their perceptions and judgments of their sexual behaviours. Work, home and family circumstances, for instance, have changed through globalisation, thereby giving adolescents more independence and freedom of sexual decision. In turn, female adolescents have become more prone to early pregnancies than before.

3.2.3 Socio-Economic Status

3.2.3.1 An overview of socio-economic status

According to Bronfenbrenner's (1979:3) bioecological theory, the socio-economic context can be viewed as a component of the macrosystem or exosystem. As noted by Bronfenbrenner, the macrosystem comprises subsystems that include culture, socio-economic status, poverty and ethnicity (see Matlala, 2011:108; Ben-David, 2011:64). The socio-economic context is macrosystemic because it can translate into a subculture, with values and norms that can determine the broad ideological and organisational patterns (Owens, 2002:28) within which people develop, such as a subculture of deprivation which people can pass on from generation to generation. Oakes and Rossi (2003:769) also contend that socio-economic status summarises a person's or group's access to culturally relevant resources useful for succeeding in if not moving up in the social hierarchy. As a subculture, the socio-economic context imparts meanings to social behaviour, creates a system of values on which to base decisions and determines how adolescents, for instance, perceive their behaviours (Owens, 2002:464). Low socio-economic status can, for instance, mediate reactions to financial

hardships such as the promotion of a negative sense of self that may provide the motivating basis for deviant behaviour such as inappropriate sexual activities (Silbereinsen & Todt, 1994:119). Bergin and Bergin (2012:402) concur by explaining that the willingness to have a child out of wedlock varies by level of socio-economic status.

Socio-economic status can also be a subsystem of the exosystem because it comprises settings or events that influence the adolescent's socialisation although the adolescent has no direct role. The impact of low socio-economic status on significant others in the adolescent's life, such as parents and caregivers, shapes the settings in which adolescents are found and the people who occupy the settings (Stapleton, 2010:18). The economic status of a female adolescent can, for instance, be indirectly determined by parents' work and socio-economic status. If parents are not well remunerated at work, it can create financial insecurity, a context which can dramatically but indirectly affect the adolescent's perceptions, behaviour and life in general. Socio-economic status is thus a way of looking at how individuals or families fit into society using economic and social measures (Boskey, 2014:1).

Socio-economic status can be defined as an economic and sociological measure of a person's work experience and of an individual's or family's economic and social position in relation to others, based on income, education and occupation (Wikipedia, 2010:1). Brogan (2009:1) notes that there are three levels of socio-economic status namely, low, moderate and high socio-economic statuses. Low socio-economic status in particular can mean poor education, lack of amenities, unemployment and job insecurity, poor working conditions and unsafe neighbourhoods, with their consequent impact on family life (Brogan, 2009:2). Level of education often defines a person's low socio-economic status partly because education determines one's career prospects which subsequently determine that person's income. Low levels of education are thus often associated with poor working conditions, unemployment, job insecurity, low income and few resources (Boyden & Bourdillon, 2012:125). The relationship between education and socio-economic status is somewhat circular because socio-economic status determines educational outcomes such as educational disadvantage (lack of educational resources), which in turn determine the socio-economic status of the next generation (Taylor, 2012:1).

Low socio-economic status is also associated with poor neighbourhoods or less prestigious environments. Brogan (2009:2) explains that people of low socio-economic status reside more often in farm and rural areas or crowded parts of cities and less often in suburban areas.

Because of low income, people of low socio-economic status cannot afford to live in prestigious environments such as suburban areas; hence they often experience poor living conditions and unsafe neighbourhoods.

Minujin and Nandy (2012:69) posit that adolescent poverty, deprivation, vulnerability and the risk factors that can trigger a lifelong cycle of disadvantage such as teenage pregnancy is a major concern worldwide partly because it affects the future life trajectories of most adolescents. Saparker (2012:1) reports that socio-economic status is one factor in which the social and economic experiences help mould an adolescent's personality, attitudes, perceptions and lifestyles, including sexual behaviours. If socio-economic status is low, it can influence the adolescent to participate in inappropriate sexual acts to alleviate poverty because payment is often involved especially where older men are involved with female adolescents.

3.2.3.2 The influence of socio-economic status on teenage pregnancy

Erikson's psychosocial theory explains eight stages through which a healthy developing individual should pass from infancy to late adulthood. In each stage of psychosocial development an individual confronts and hopefully masters new challenges or crises. According to Erikson (1960:43), each stage builds upon the successful completion of earlier stages. The challenges of stages which are not successfully completed may be expected to reappear as problems in the future. In other words, when an individual such as a female adolescent fails to overcome the crisis of identity versus role confusion, her psycho emotional wellbeing, as well as her thoughts, feelings and behaviour in general are negatively affected, leading to role confusion.

The identity versus role confusion is the stage of psychosocial development in which most adolescents wrestle with questions of who they are and how they fit into the adult world (McDevitt & Ormrod, 2010:405). Lippman (1993:330) asserts that one of the more difficult challenges of adolescence is the task of forming a stable identity with which to embrace the responsibilities of adulthood. Erikson (1960:43) suggests that the adolescents must integrate the healthy resolution of all earlier conflicts in order for them to be able to successfully discover their identity. The earlier conflicts include the basic sense of trust, a strong sense of independence, competence and a feeling of control over one's life (Erikson, 1960:43; McDevitt & Ormrod, 2010:405). Adolescents who have successfully dealt with earlier conflicts are ready to solve the identity crisis. If the adolescent solves this conflict (identity

crisis) successfully, she will come out of this stage with a strong identity and ready to plan for the future. If not, the adolescent will sink into confusion, unable to make sound decisions and choices, especially about career prospects, sexual orientation and her role in life in general (McDevitt & Ormrod, 2010:405; Erikson, 1960:43).

There are many factors that can negatively affect the successful completion of the psychosocial stages of an individual and they include the low socio-economic circumstances of that individual. Chambers (2008:113) asserts that individuals are strongly formed and constrained by their social circumstances such as low socio-economic status. Vygotsky's sociocultural theory postulates that human development starts with dependence on caregivers such as parents, teachers, guardians and older peers and the developing individual relies on the vast pool of transmitted experiences of others (Vygotsky, 1978:64). The sociocultural theory thus emphasises the need for adult support for learning and development of adolescents in particular. Woolfolk (2010:50) posits that in the Vygotskian view children are not alone in the world of discovery but are assisted, or mediated by family members, teachers, peers and even software tools. If there is no support, the low socio-economic circumstances of adolescents can constrain development by creating a social environment that may negatively influence how they think and what they think about. In other words, when both Erikson's psychosocial and Vygotsky's sociocultural theories are juxtaposed, it shows that if adolescents fail to get adequate support because of the low socio-economic status of parents, they may experience a crisis that can influence their sexual behaviours as well as their perceptions of teenage pregnancy.

Adolescents with different socio-economic backgrounds differ in their perceptions of the costs and benefits of teenage parenthood and nonmarital sexual acts in particular (Parke & Clarke-Stewart, 2011:63). Female adolescents from low socio-economic families, for instance, may see fewer negative consequences of early childbearing than those of higher socio-economic standing (Minujin & Nandy, 2012:69). Economic disadvantage, according to Parke and Clarke-Stewart (2011:30), is associated with greater acceptability of nonmarital sexual activity as well as childbearing, especially when it involves economically advantaged male partners. Female adolescents from low socio-economic backgrounds may view social welfare assistance more positively because they may see childbearing as a rewarding and viable alternative. Makiwane, Desmond, Richter and Udjo (2006:3) assert that in many social democratic countries, an increase in teenage fertility has been found to be associated with the existence of an elaborated welfare system. According to Weinstein (2013:117), it seems as if

the welfare systems are rewarding teenage mothers for bearing illegitimate children. It implies that the socio-economic background of female adolescents can affect their perceptual fields, especially about how they view sexual acts and childbearing. Due to low socio-economic status, adolescents and their parents can view adolescent parenthood positively especially when they take child support grants into consideration (Weinstein, 2013:117; Voydanoff & Donnelly, 1990:76). However, the direct link between child support grants and teenage pregnancy is still a debatable issue within the research community.

The psychological impact of low socio-economic status can also influence adolescents to indulge in inappropriate sexual acts. Rice (1992:210) explains that living in low socio-economic environments, adolescents are mostly at the mercy of life's unpredictable events. The adolescents in such environments can experience harsh economic conditions such as loss of work by parents which results in lack of resources that lead to family and school difficulties. Silbereisen and Todt (1994:119) note that adolescents from low socio-economic families often experience erratic and rejecting behaviour of parents. Bergin and Bergin (2012:402) explain that children from low socio-economic environments experience harsher parenting because parents who feel financial stress tend to treat their children with more hostility. When children lack a strong primary caregiver due to low socio-economic status they face emotional and social instability (Taylor, 2012:2). Silbereisen and Todt (1994:119) assert that substantial loss of family income leads to increasing emotional strain that promotes problem behaviours in adolescents. The harsh living conditions promote, inter alia, insecurity, low self-esteem and low self-efficacy of the adolescents (Rice, 1992:210). The lower their socio-economic status, the more vulnerable they are to the stressors of life. Hence such adolescents may strive for security because they never feel certain about their own lives (Rice, 1992:210). One way for such adolescents to gain security is to indulge in early sexual acts with mostly older sexual partners whom they may believe could alleviate their financial woes. Bender and Leone (1994:62) assert that early parenthood is thus not only an index of the levels of poverty but also a measure of their efforts to escape their harsh conditions by alliance with older partners to escape poverty.

An adolescent's sense of self can be negatively affected by lack of economic support which, in turn, provides the motivating basis of deviant behaviour (Silbereisen & Todt, 1994:120). Adolescents from low socio-economic households may fall pregnant because they may want to have a baby they can call their own. It means that after having a baby, low socio-economic adolescent mothers may feel a sense of self-worth.

Harsh economic conditions can impact negatively on female adolescents' educational achievement (Saparker, 2012:2) which in turn influences their sexual behaviours. Families with low socio-economic status often have less success in preparing their young children particularly for school because they typically do not have access to promote and support young children's development and provide them with their educational needs (Saparker, 2012:2). Many low socio-economic parents may also give inadequate attention to their children's schooling partly because they may not have the means and, secondly, the ability to do so due to their low level of education. Such socio-economic conditions can cloud female adolescents' judgments of the importance of delaying sexual acts, especially when they see a bleak future. Saparker's (2012:2) studies revealed that female adolescents raised by parents with lower levels of education are more likely to fall pregnant and to become adolescent mothers. It means that low socio-economic status is associated with a vicious cycle of educational underachievement that translates into inappropriate sexual acts and adolescent childbearing (Graham, 2007:27). Conger (2010:685) explains that economic decline places significant pressures on many families in terms of financial distress and fewer resources to help family members pursue their educational goals. In such situations, female adolescents may develop negative attitudes to schooling. Low motivation for schooling hinders the creation of visions, possibilities and ultimately potential in thinking about the future, hence childbearing may become the most viable option (Graham, 2007:27; Minujin & Nandy, 2012:148). Lack of motivation to complete education can also lead to school failure, which is one of the most crucial factors along the pathway that results in early childbearing (Moore & Rosenthal, 2006:28). School failure discourages adolescents from taking schooling seriously because of its association with a bleak future. When adolescents get discouraged from pursuing schooling due to low economic status, they also develop low career aspirations that can translate into early entry into the sexual arena.

Low socio-economic status families are often associated with inadequate parental control and supervision of adolescents' dating patterns which can lead to adolescent pregnancy (Parke & Clarke-Stewart, 2011:31). The AIDS pandemic has contributed to the increase in child headed families. In child headed families there are no adult figures, hence control and supervision of adolescents is inadequate. Many low socio-economic families also have high levels of female headed families, therefore there is little supervision of adolescent dating habits (Parke & Clarke-Stewart, 2011:31). One parent households, especially those headed by female parents, have more chance of being of low economic status, partly because men are

more often breadwinners in developing societies or communities. According to Parke and Clarke-Stewart's (2011:31) findings, lack of parental supervision of early dating is an extremely important predictor of teenage pregnancy. It means that if female adolescents are not properly supervised, especially with regard to their sexual behaviours, they can get out of control and fall pregnant. Swisher et al.'s (1994:72) research, for instance, revealed that rates of teenage pregnancy declined when parents supervised the adolescent's dating habits. Female adolescents who experience less parental control and disapproval of early sexual activity (especially due to low socio-economic environments) are more likely to indulge in early sexual acts (Parke & Clarke-Stewart, 2011:31). The unwarranted freedom accorded to adolescents in such families with less parental supervision provides more opportunities for sexual activity. Such female adolescents can be free without responsibility to an extent that they can initiate sexual acts early and fall pregnant.

Whilst single parent households are often associated with permissiveness, lower socio-economic status families also demonstrate hierarchical stereotypes that can promote rigid parental relationships with adolescents (Saparker, 2012:2). Low socio-economic status families can also mean less freedom for the female adolescents particularly to communicate and explore their sexuality. Brogan (2009:1) explains that low socio-economic status parents in most cases expect obedience without question from their children so they encourage their children to conform to society's expectations, while the high socio-economic status parents are less directive and more conversational, thereby encouraging creativity and exploration. These differences in parenting styles foster self-confidence in the high socio-economic status adolescents and uncertainty about life in the low socio-economic status adolescents (Brogan, 2009:1). The parents in low socio-economic families seem closed or inaccessible to the adolescents' communication to an extent that such adolescents may be deprived of parental guidance, especially knowledge about sexual matters (Saparker, 2012:2). When female adolescents indulge in sexual acts with uncertainties about life and also without adequate knowledge of sexual facts such as methods of birth control, they become vulnerable to early pregnancy.

Eirich (2010:1) concurs with the stereotypical tendencies of low socio-economic families by commenting that low socio-economic status is one of the family characteristics that increase educational differences between brothers and sisters in the same families. One of the differences in low socio-economic status families is that they give more priority to sons than daughters with regard to educational support (Eirich, 2010:1). Priority is probably driven by

limited resources available in the family. The other reason could be that sons are mostly believed to perpetuate the family name; hence they get preferential treatment, whilst daughters eventually get married and leave the home. Wood (2009:521) also highlights that greater family control is normally exercised over adolescent daughters than over sons in many low socio-economic families partly because of their gender stereotypes that often keep females at home for household chores. The atmosphere in low socio-economic status families can thus promote psychological distance, if not rejection, of the female adolescents by the adults. It is therefore one reason why many female adolescents from such families have used marriage as an escape from home. The female adolescents may thus find early marriage or early sexual acts especially with older male perverts as viable alternatives to attain their independence.

Low socio-economic neighbourhood and community environments can influence female adolescents to indulge in inappropriate sexual activities. Low socio-economic status adolescents in many cases live in environments that are conducive to early childbearing such as crowded townships that are characterised by heavy alcohol consumption and behavioural problems (Brogan, 2009:2). Moore and Rosenthal (2006:26) explain that living in an environment characterised by poor and crowded housing and serious social disorganisations, such as ghettos or high density suburbs especially, teenagers are often exposed to a street culture which valorises male virility. Many health compromising lifestyle factors experienced in such environments, such as risky sexual behaviours, alcohol, drug or tobacco use, are associated with teenage pregnancy because they tend to co-occur (Moore & Rosenthal (2006:26). It means that, when neighbourhood quality decreases due to low socio-economic status, social problems such as teenage pregnancies are likely to spread fast, especially through peer influence and the likelihood of modelling inappropriate sexual behaviours. Crane (1991:1226) contends that social problems such as teenage pregnancies are thus more common in poor, minority neighbourhoods due to poor people's values.

3.2.4 Media

3.2.4.1 An overview of media

According to Bronfenbrenner's (1979) bioecological theory, media is part of the exosystem. Bronfenbrenner explains that the exosystem consists of settings that do not include the child but that affect the child, such as city government, the workplace, school board, mass media, community health and welfare services (Owens, 2002:28). Mass media is capable of

influencing adolescents' behaviours especially through the process of modelling. The adolescents may not be directly involved in mass media but it creates a context in which the adolescents are able to adopt values. It means that the mass media provides models which adolescents often imitate. In so doing, the mass media is capable of shaping adolescents' perceptions of reality.

Media refers to communication channels through which news, entertainment, education, data, or promotional messages are disseminated (Silverstone, 2007:215; Parikka, 2013:1; Basch, 2011:614). Media includes every broadcasting medium such as newspapers, magazines, television, radio, billboards, direct mail, telephone, fax and internet (Parikka, 2013:2). It also includes data storage materials such as tapes, disks, diskettes, CDs and DVDs, all falling under one umbrella term - mass media. The mass media, according to Postill (2010:20), constructs messages with embedded values and disseminates those messages to specific portions of the public such as the youth in order to achieve specific goals. Therefore, newspapers, movie studios, television networks, radio stations and the internet are all a part of the mass media which construct messages to certain groups of people for certain purposes such as entertainment, education and information.

Parke and Clarke-Stewart (2011:303) assert that electronic media in particular have totally changed children's lives over the past few decades. It is probably because today television, electronic games, internet access and cell phones are becoming unquestioningly important in most adolescents' lives from a very early age; hence adolescents are, in most cases, more prone to be influenced by the mass media than adults. The mass media create messages with embedded values some of which are subjective and biased. Romantic scenes mostly seen in television, for example, can be far from reality but female adolescents can think that the behaviours portrayed in them are appropriate and realistic enough to adopt. Derne (2008:21) explains that, because of the mass media, people in all parts of the world change or adapt to other values because of exposure to diverse cultural values and beliefs. The media is therefore a pervasive force in all people's lives, but especially in the lives of children and adolescents (Miles, 2000:79).

3.2.4.2 The influence of media on teenage pregnancy

According to Erikson's psychosocial theory, adolescents are in the process of forging identities (Meece & Daniels, 2008:23; Owens, 2002:15-17). Tromsdorff and Chen (2012:6) assert that adolescents undergo a process of identity development that reflects their cultural

and individual values and beliefs. Adolescents try to figure out who they are in order for them to shape their values and adult identities. In other words, as adolescents seek to find who they are, they begin to compare their views with those of society at large. The mass media transmits information that mirrors societal values (Rutherford, 2011:38), thus it can provide adolescents with information from which they can make comparisons. Adolescents are thus able to compare their views with those of society through various forms of mass media. Woolfolk (2010:103) posits that adolescence is a crucial period of value development, therefore the media can create suitable contexts for them to identify with a diversity of values that include sexual values.

Bandura's (2002:269) social cognitive theory emphasises the power of observation and imitation which can influence adolescent sexual behaviour. Bandura explains that adolescents can learn through observing and imitating the behaviour of others, a process he refers to as modelling (see Rutherford, 2011:38). Modelling is therefore a socialisation process by which habitual response patterns develop through imitation of different models from social environments as provided by mass media (see Dopkins Broecker & Hillard, 2009:1). Through the mass media, the wider culture or macrosystem, for instance, propagates and imposes particular models (Rutherford, 2011:38). Rutherford (2011:96) thus explains that when family influence declines, especially during adolescence, peers and especially entertainment heroes in the media become increasingly important as models, particularly influencing verbal expressions, hairstyles, clothing, music and basic social values of adolescents.

The social cognitive theory also emphasises the power of vicarious reinforcement. Vicarious reinforcement consists of the positive or negative consequences that one observes others experience. When others are rewarded for certain behaviours, it increases the possibility that the observer will also show similar behaviours (Woolfolk, 2010:349). An adolescent may change behaviour after seeing the behaviour being reinforced in the mass media by a role model (McDevitt & Ormrod, 2010:489). It means that role models in mass media can provide a number of vicarious rewards for adolescents. Rutherford (2011:98) asserts that what adults do and the role models they represent are far more important in influencing adolescent behaviour than what they say. What role models do in the mass media can thus be very powerful in influencing especially adolescent perceptions of sexual acts.

Vygotsky's (1978:57) sociocultural theory also postulates that adolescents construct meanings from their social context and at the same time the adolescent is constructed by the

social context and its role players. The mass media can become a social environment from which adolescents can construct different meanings, but at the same time the adolescents can also be constructed by the mass media. Turuk (2008:244) explains that adolescents acquire knowledge through contacts and interactions with other people, and gradually assimilate and internalise that knowledge, adding their personal values to it. Although adolescents' interactions with the mass media are mostly indirect, they can still assimilate and internalise what they see in the mass media.

Clarke and Thomas (2006:1) contend that mass media is partly responsible for weakening traditional norms or values associated with sexuality such as sexual abstinence before marriage. Clarke and Thomas' (2006:1) findings revealed that the sexual stimuli presented in various media often contradict traditional values of, for instance, chastity and asceticism. The sexual relations portrayed in media are in most cases premarital, hence they may contradict traditional values. Brown (2002:42) notes that the mass media reinforces a relatively consistent set of sexual and relationship norms that are not suitable for adolescent consumption, such as premarital sexual relationships which adolescents can adopt as the norm. Kelly (2001:15) contends that as sex related issues receive more media exposure, some of the so-called taboo topics in traditional upbringing gradually become more acceptable. McLeod (2009:210) emphasises that it is a universal phenomenon that where people have lost certain traditional moral codes and measures of control there is an increase in premarital and extramarital sexual relations and illegitimate births. According to Kelly (2001:15), people are now becoming far more permissive in their sexual behaviours than before, partly influenced by the mass media. The sexual attitudes and behaviours of adolescents are thus being shaped by the surrounding cultural influences which are also mirrored in the mass media (Kelly, 2001:6). Female adolescents may thus model some of the irresponsible sexual practices portrayed in the media, thereby going against traditional expectations of sexual practice. Female adolescents may thus indulge in inappropriate sexual activities that can result in teenage pregnancies.

The mass media is less educative in the prevention of pregnancy and in the promotion of responsible sexual behaviour; hence adolescents have more chances of modeling irresponsible sexual behaviours from mass media. Parke and Clarke-Stewart (2011:309) posit that television, for instance, often portrays an irresponsible orientation to sex, often outside a committed relationship, with little reference to contraception, pregnancy prevention or sexually transmitted infections. Miles (2000:72) also posits that the mass media portray risky

adult behaviours as exciting and attractive; hence many female adolescents are attracted to modelling inappropriate sexual behaviour, making them more vulnerable to early childbearing.

The content and prevalence of sex related matters portrayed in mass media influences adolescents to develop positive attitudes towards inappropriate sexual acts. Kelly (2001:12) points out that nowadays it is practically impossible to escape sex, nudity, provocative language and complex sexual themes in any of the public media (Kelly, 2001: 428; Parke & Clarke-Stewart, 2011:309). Vincent (2012:33) also asserts that sexuality and sexual behaviour are all around adolescents on television, films, popular music and advertisements. Bender and Leone (1994:35) also comment that the mass media has become more explicit about sexual behaviours than in the past as evidenced by scenes of suggested sexual intercourse and behaviours, sexual comments and innuendos. The numbers of implied acts of sexual intercourse are also on the increase (Kelly, 2001:428; Bender & Leone, 1994:35). Kelly (2001:428) also asserts that depictions of flirting, seductive behaviour and kissing are often portrayed on television or in the movie theatres. Parke and Clarke–Stewart’s (2011:310) findings revealed that sexual content on television can be linked to a higher likelihood of pregnancy. Bender and Leone’s (1994:35) findings also revealed a strong correlation between the amount of sexually-oriented television shows watched and the probability that an adolescent has had sexual intercourse. Adolescents are thus under incredible pressure from mass media to become sexually explicit in their behaviour (Mazzarella, 2005:5).

Mazzarella (2005:69) posits that millions of adolescent girls rely on popular teenage magazines for information about fashion, beauty, dating, sex and relationships. It implies that books and magazines can also play a significant role in shaping adolescents’ thoughts, feelings and perceptions of their sexual behaviours. Whilst it is important that adolescents need information about sexual matters such as healthy sexual practices from mass media, the adolescents can also adopt inappropriate sexual acts they observe and read about in the mass media.

Adolescents can also be exposed to pornography and other adult sexual material through internet connectivity. Held (2004:196) explains that child pornography in cyberspace has grown, sexual behaviour is being taught to youngsters through the wide distribution of pornography, giving female adolescents a perverted perspective on sexuality. Whilst it is necessary for female adolescents to gain knowledge about sexual matters, pornography can

also influence adolescents to experiment in an inappropriate way, making them vulnerable to pregnancy or other problems of a sexual nature.

The power of mass media can influence adolescents more than adults because most adolescents are not developmentally ready, especially psychologically and socially, to take decisive actions against taking part in inappropriate sexual acts. Reyna and Farley (2006:1) explain that adolescents are not developmentally advanced enough to make informed decisions about risky behaviour. Most adolescents have only started formal operational thinking, thus they may not see the consequences of their acts. It implies that adolescents may engage in sexual behaviour without being cognitively or emotionally ready.

Parke and Clarke-Stewart (2011:320) explain that young people display magic window thinking in which they do not distinguish between television or video game fantasy and reality; hence they easily develop biased perceptions about sexual matters. Adolescents may thus struggle, for instance, to differentiate between love and lust. Kelly (2001:12) comments that mass media often perpetuates myths and exaggerations about the levels of sexual activity among people, thus exposing female adolescents to unrealistic portrayals of sexual content. The mass media can thus influence adolescents to have a romantic but unrealistic idea about sexual practices; hence they can become vulnerable to early pregnancy.

Adolescence is also a critical moment in identity formation, a time of searching and introspection (Erikson, 1968:92), hence the prevalence of sexual acts in the mass media tends to provide more possibilities for adolescents to experiment and to discover who they are in terms of their sexual identities. Bender and Leone's (1994:34) findings revealed that teenagers reported that television is equally or more encouraging than their friends when it comes to sexual experimentation. Adolescent sexual experimentation may thus include a range of multiple alternative sexual behaviours, roles and tasks depicted in the mass media (Zembar & Blume, 2009:257; Hurrelmann & Engel, 1989:233).

Killen and Smetana (2014:94) also explain that when considering the sexual insecurity that is normally associated with adolescence, it is hardly possible to overestimate the sexual encouraging influence of movies, television, advertisements and a vast range of reading materials. As articulated by Erikson (1968:52), adolescents are in search of identities such as their sexual orientations, and role confusion may become a challenge with diverse exposure in the mass media. Adolescents are in an impressionable stage and the mass media can influence their identity formation, especially their sexual orientation. Woolfolk (2010:103)

contends that adolescents can thus identify and respect values portrayed in the mass media as their own. The mass media provides alternative possibilities to sexually insecure adolescents. Some of the alternative possibilities can negatively influence adolescents to imitate inappropriate sexual acts.

The mass media often promotes values of independence that adolescents can misinterpret as sexual freedom. Louw and Louw (2007:278) contend that adolescent dating is strongly associated with too much freedom and independence of adolescents. Miles (2000:70) asserts that satellite television, for instance, reinforces individualism in adolescents by promoting values of independence, self-determination and self-realisation. Derne (2008:27) asserts that once television is available, people of whatever culture or origin become more equal, wanting the same things. It implies that the values of independence portrayed in global media, for example, may be incorporated by adolescents of different cultures. It implies that when adolescents model independent values there are more chances of them experimenting with sexual matters because they may believe that they have more control over their lives than before. As a consequence, the adolescents may indulge in early dating practices that can make them vulnerable to early childbearing.

Parental control of adolescents is also being overshadowed by the power and attractiveness of mass media in influencing adolescent sexual behaviour (Parke & Clarke-Stewart, 2011:303). Miles (2000:72) explains that parents and other socialisation agents have arguably shirked their responsibilities when it comes to directing adolescents away from risky forms of behaviour like teenage sexuality; thereby allowing the mass media a more fundamental influence on adolescent sexual behaviours. It means that in the absence of proper parental guidance on sexual behaviour, the mass media can now play a more active role in influencing adolescents in risky sexual behaviours such as adolescent sexual acts.

It can be surmised that adolescents cannot escape from the sexual influences of the mass media; hence they often incorporate inappropriate sexual practices into their behavioural patterns and identities.

3.2.5 Social Networks

3.2.5.1 An overview of social networks

Bronfenbrenner proposes that human development is influenced by a series of contexts, one of which is the exosystem. According to Matlala (2011:104), the exosystem is an extension of

the mesosystem, embracing specific social structures, both formal and informal, that may impinge on adolescents' behaviour.

McDevitt and Ormrod (2010:407) posit that human beings of all ages seem to have a fundamental need to feel socially connected to and loved and respected by other people. Across the life span, this need (to feel socially connected) is fulfilled with social bonds of various types that include friendships, romantic ties, marital partnerships and family relationships (McDevitt & Ormrod, 2010:407). Adolescents in particular have a need for relatedness, and therefore social networks are important for digital connectedness, seeing that most adolescents enjoy this type of communication.

Social networks can be defined as web-based services that allow individuals to construct a public or semi-public profile within a bounded system, articulate a list of other users with whom they share a connection, view and transverse their list of connections and those made by others within the system (Charnigo & Barnett-Ellias, 2007:1; Bahney, 2006:2; Webopedia, 2014:1). Lenhart and Madden (2008:1) explain that a social networking site is an online site where a user can create a profile and build a personal network that connects him or her to other users. A profile on social network sites includes a description of a person's interests and usually a photo (Charnigo & Barnett-Ellias, 2007:1; Lenhart & Madden, 2008:1). Social networking services thus focus on building online communities of people who share interests and/or activities and who are interested in exploring the interests or activities of others (Lenhart & Madden, 2008:1). Social networking is thus the practice of expanding one's business and/or social contacts by making connections with others. It is a social structure made up of a set of social actors such as individuals or organisations. Lee and Kim (2011:205) contend that online social networks are popular because the internet is filled with millions of individuals who are looking to meet other people to gather and share firsthand information and experiences, develop friendships, professional alliances and find employment. Social network sites include Facebook, Friendster, LinkedIn, Twitter, YouTube, MySpace, email and instant messaging (Charnigo & Barnett-Ellias, 2007:1; Lenhart & Madden, 2008:1). A person can set up accounts on most of these sites and then link it to other peoples' pages, thus increasing interconnectivity.

Social networks have become popular for a variety of reasons. One of the major advantages of social networks is that they help users to connect with new people, share opinions, with like-minded people and stay in touch with old friends and colleagues (Brandignity, 2012:1).

Jung (2015:2) also posits that social networks such as MySpace, Classmates or Yahoo 360 are user friendly, easy to navigate, require little knowledge of the internet, and thus they are very popular. McKinney (2011:2) also contends that most of these highly popular social networking sites are free to use or easily affordable and that makes them open to everybody. Due to the fact that social networking sites are so popular, they also bring some risks, inter alia, that of interconnecting with dangerous people such as sexual perverts.

Adolescents live within such networks of relations and share their social and private worlds with a variety of people comprising their networks (Landry, 2014:2). These are the people with whom the adolescents' knowledge of social reality is co-constructed, implying that they influence each other. Adolescents in most parts of the world are increasingly using texting and online social networking sites to connect with not only other adolescents but with other people in general (Dick et al., 2014:156).

Using social media websites is therefore among the most common activities of today's adolescents (O'Keefe & Clarke-Pearson, 2011:800; Lenhart & Madden, 2008:1). Mobile social networking is particularly very popular probably because many smart phone users can access various social networks using their cell phones (O'Keefe & Clarke-Pearson, 2011:800; Lenhart & Madden, 2008:1). Cell phones are easily accessible in many countries; hence many people are able to use their cell phones to participate in social network sites.

3.2.5.2 The influence of social networks on teenage pregnancy

Romer (2010:263) explains that "adolescents tend to leave their families and venture forth with peers to explore new territory and select mates". The peer group and other like-minded people may thus become the major source of information for the adolescent. One of the ways in which adolescents can venture forth with peers and other people is through social networks.

In Erikson's (1968:263) view, adolescence is a phase of interpersonal identity development. Luyckx, Goosens, Soenens and Beyers (2006:361) explain that during the interpersonal identity development an exchange of propositions and counter propositions occurs, resulting in qualitative transformations of the individual in the direction of the interactions. It means that the actions or thoughts of others during interpersonal identity development may create social influences that can change adolescents' behaviour. Louw and Louw (2007:309) explain that, according to Erikson's psychosocial theory, society allows adolescents a certain period of time - called the psychosocial moratorium - to find themselves and their roles as adults.

Experimentation takes place during this psychosocial moratorium by, for instance, trying out various identities, by endless self-examination, fantasising about roles and identifying with other people especially with whom they are interconnected within their social networks (Owens, 2002:577; Louw & Louw, 2007:309).

Santrock (1998:38) asserts that the genital stage in Freud's psychosexual development stages is a time of sexual re-awakening in which the source of sexual pleasure now becomes someone outside of the family, in contrast to the anal stage. Max (1993:62) explains that dramatic bodily changes in puberty set in motion an important stage in self-development that is the integration of sexual maturity into the totality of self-experience. It is thus in adolescence that individuals need intimate relationships to learn to be intimate. Therefore, through social networks, the peer group becomes a major reference point for adolescents.

According to Kohlberg's theory of moral development, most adolescents still show conventional moral decision making. For most adolescents, moral decision making is based on social norms or maintaining social order in respect of what is expected by others (Matlala, 2011:44; Bergin & Bergin, 2012:354). The adolescent may think that he/she has to be good in order to be seen as being a good person by others. Moral decisions are thus based on whether or not their decisions would win the approval of people whose opinions matter to them, like people connected to them via their social networks (Oswalt, 2010:1).

According to Sullivan's interpersonal theory, human behaviour is shaped by our attempt to maintain comfortable relationships with significant others, hence the need for adolescents to establish, for instance, social network ties. According to Piaget's theory of cognitive development, adolescents are developing capabilities for abstract thinking and understanding the perspectives of others, hence they are more motivated to seek the opinions of others such as acquaintances on social networks (Choudhury et al., 2006:165). Choudhury et al. (2006:165) assert that by age 11, for instance, the emergence of formal operational thought enables adolescents to differentiate between the perceptions of parents and other people. Hence they start to consider other people's thoughts and perspectives. One can surmise that adolescents have a strong motive to affiliate with other people out of their immediate family environments in their quest to identify with values, beliefs and behaviours of these peers. Hurrelmann and Hamilton (1996:69) assert that adolescence is an important time in life for the establishment of an autonomous social position and this leads adolescents to participate in other social groups that will gain relevance in shaping their worldviews. Social network ties

thus afford adolescents opportunities to make digital interconnections that allow them to access other peoples' perspectives on different aspects of life, including sexual matters.

Whilst social networks offer the adolescents of today a portal for entertainment and communication, not all of these sites are healthy environments for adolescents since they can meet up with people whose intentions may not be good for them (O'Keefe & Clarke-Pearson, 2011:800). Social network sites provide electronic environments for female adolescents to, for instance, explore their sexual identity but in the process they can be influenced to experiment with improper sexual practices, causing them to fall pregnant. Silverstone (2007:215) warns that if technology is well applied it can benefit humans, but if it is wrongly applied it can cause harm to human beings such as influencing adolescents to engage in risky behaviours like inappropriate sexual activities.

An online relationship requires very little effort from both the parties involved, thus the possibilities of female adolescents creating sexual relationships through social networks are very high. Landry (2014:2) reiterates that the social network sites are expanding sources of content that include sexual content. Parke and Clarke-Stewart (2011:316) acknowledge that, after analysing a large sample of online conversations, adolescents were on average exposed to sexual content every minute and an obscenity every two minutes. It implies that the female adolescents are now exposed to a variety of sexual content which can influence their sexual behaviour.

Social network sites may encourage female adolescents to be more public and open about their personal lives. Jung (2015:2) posits that because intimate details of the adolescents can be posted so easily on social networking sites, users often bypass the filters they might normally employ when talking about their private lives. It means that social networks can diminish female adolescents' privacy thereby making their information available to potential sexual predators.

According to McKinney (2011:2), it is amazing to see how people behave when their true identity is masked, which is possible on any social network site or in chatrooms on these sites. Such people may thus post anything without fear. Users of social network sites, who hide behind anonymity, often influence adolescents to reveal too much intimate information about them. Anonymous people on social networks can cause incredible harm to female adolescents by the sexual matters they raise and by the incredible influence they have on sexual behaviour.

Social network sites allow female adolescents to explore their sexual relations without much interference from parents and significant others. Barnes (2006:2) contends that social networking tools such as MySpace, WhatsApp and Facebook have almost become indispensable for teenagers, who often think their lives are private as long as their parents are not reading their journals. Hence most young people are pouring their minds and hearts out into cyberspace. They are doing it to get feedback from peers, especially about sexual matters (Barnes, 2006:2). Social network sites provide adolescents with suitable platforms for expressing their sexual intentions and desires as well as getting feedback from peers.

Rice, Gibbs, Winetrobe, Rhodes, Plant, Montoya and Kordic (2014:21) explain that female adolescents' sexual behaviours are also partly influenced by sexting which is the sending and receiving of sexually explicit cell phone text or photo messages. Sexting is an adolescent-friendly way of engaging in conversations about sexual activity, therefore it has become part of a cluster of risky sexual behaviours among adolescents (Rice et al., 2014:21). Cell phones are very popular among adolescents for sexting because they provide instant access to people 24/7, creating a major shift in the social experiences of both children and adolescents (Jung, 2015:2). Mazarella (2005:180) explains that adolescents use instant messaging, for instance, to enhance relational dynamics and to experiment with notions of sexuality. In this regard, Rice et al. (2014:22) also posit that sexting is strongly correlated with unprotected sex. It probably implies that adolescents can influence each other through social networks and especially chatrooms to engage in sexual acts. The ultimate consequence might be unwanted pregnancies.

The relationship between two people online is in most cases not real since it takes time and effort to make a deep, personal connection and to cultivate a genuine relationship, hence many female adolescents' sexual behaviours can be influenced by sexual fantasy available in cyberspace (McKinney, 2011:1). Jung (2015:2) explains that social network sites can make it more difficult for female adolescents to distinguish between meaningful relationships fostered in the real world and the numerous casual relationships formed through social networks. It means that female adolescents in particular can be influenced by the false casual connections on social networks. In doing so, they can make wrong judgments when confronted with real sexual challenges such as the appropriate time to initiate sexual relations.

An important part of the maturing process in adolescence is the loosening of the child's emotional ties with parents (Rutherford, 2011:83). Adolescence is thus a developmental period of expansion of relationships outside the family and into the broader arenas of society in order for them to consolidate their independence. Social network sites can widen the adolescents' chances to interconnect with many people with different values from those learnt at home (Lee & Kim, 2011:206; Bowler & Brass, 2011:70). Some of the values may influence them to possible sexual risky behaviours. Jung (2015:2) also maintains that social network sites allow an individual to find and connect with just about anyone, thus widening the female adolescent's environment to explore and connect about sexual matters in particular.

Landry (2014:2) asserts that probably no stage of life is characterised by stronger and more rapidly changing manifestations of emotionality than the period of adolescence, due to puberty. It implies that adolescents can become easily swayed by social networks to seek answers about their emotionality from, especially, peers. In their emotional confusion, female adolescents can succumb to the influence of social networks, especially peers and adult perverts to practise inappropriate sexual acts that can lead into teenage pregnancy.

Social networks can thus alter female adolescents' beliefs, attitudes, expectations and feelings about adolescent sexual behaviour (Bee, 2009:6); hence they are partly responsible for the female adolescents' misjudgments about adolescent sexual acts and childbearing.

3.3 CONSEQUENCES OF TEENAGE PREGNANCY

3.3.1 An overview of consequences of teenage pregnancy

In view of Bronfenbrenner's (1979:4) bioecological theory, the female adolescent is not a mere recipient of the environmental influences but also contributes to the construction of the social environment in particular. In other words, a reciprocal relationship exists between the female adolescent and her environment. Similarly, the social cognitive theory propounded by Bandura also describes a system called triarchic reciprocal causality. It is the dynamic interplay between three kinds of influences: personal, environmental and behavioural influences (McDevitt & Ormrod, 2010:349). The triarchic reciprocal causality system emphasises the mutual or reciprocal effect of the individual (female adolescent) and the environment on each other. The female adolescent in this case is a biological system in itself which undergoes changes that include teenage pregnancy (McDevitt & Ormrod, 2010:16). One of the major assumptions of the bioecological theory is that changes at one level of the

context, in this case adolescent pregnancy, can influence what occurs at other levels of the ecological systems such as her family and community. It is therefore worthwhile exploring how teenage pregnancy affects the ecological systems. The components of the ecological systems that may be affected include the female adolescent herself, her family, the community in which she belongs, the nation and world at large.

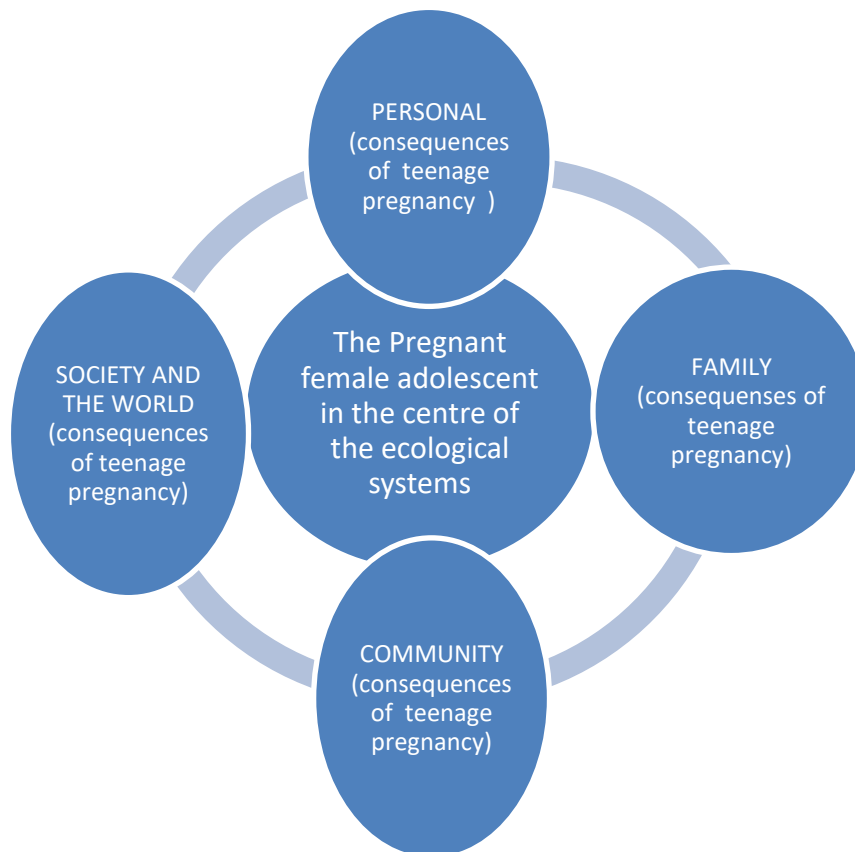


Figure 3.1 The consequences of teenage pregnancy

3.3.2 The consequences and repercussions of teenage pregnancy on the individual

The previous chapter in part discussed how teenage pregnancy affects adolescent development and how adolescent development influences teenage pregnancy. The chapter primarily addressed the impact of teenage pregnancy on the physical, emotional, social, cognitive, and moral development of adolescents. Most teenagers, for instance, fall pregnant due to failure to make sound decisions. The immature thought patterns of adolescents make them unable to tolerate delaying gratification or to think abstractly, especially in terms of future consequences. Heryan (2012:1) posits that, in view of Piaget's cognitive theory,

adolescents make faulty judgments based on an oversimplified and overly idealistic view of the world. Most adolescents face sexual decisions while still approaching daily problems in a concrete fashion, limiting their thinking to what is immediate and apparent. Many adolescents thus rarely reason in cost benefit terms but instead make their choices arbitrarily and impulsively, resulting in them facing the inevitable outcome of unwanted pregnancies.

However, after choosing the wrong path to teenage pregnancy, the female adolescent mothers encounter many unforeseen consequences which force them to reflect on their behaviour and in some cases to view the world differently. This section of chapter three is thus an extension of the consequences and repercussions of teenage pregnancy on the individual female adolescent in particular but also on their broader life world. It addresses, among others, how teenage mothers construct reality, view the world and also how they view the consequences and meanings of early parenting. The experiences of teenage pregnancy and parenting can as a consequence alter adolescents' perceptions of pregnancy and life in general.

Adolescent mothers are, for instance, faced with a dual challenge of progressing through the stages of adolescence and, at the same time, adapting to the maternal role (Devito, 2010:25). It means that as a consequence of teenage pregnancy adolescent mothers are caught between two worlds, adolescence and parenthood. Taking the Piagetian view of cognitive development, Heryan (2012:1) explains that the adolescent mother is a parent entering a complex and demanding new world but with inadequate problem solving skills, an idealised view of that world and unrealistic expectations about what to expect from her child. As a result, the adolescent mothers face additional challenges which they are not ready for such as adapting to the new role of motherhood (Devito, 2010:34).

The challenges of adolescent motherhood can also be explained within the perspective of Erikson's view of adolescent identity development. As articulated by Erikson, before an adolescent girl can take on adult roles, such as parenting, she must grapple with the tasks of adolescence that include obtaining an education, developing an identity and moving away from home (Heryan, 2012:2). The adolescent mother is thus caught between competing roles. When an adolescent mother decides to stay with her own mother for support in raising the child, she experiences role confusion regarding her relationship with her child. The adolescent mother may feel a sense of forced dependency on the parents, a dependence that directly contrasts with the adolescent's need for independence (Heryan, 2012:2). In Erikson's view, such cases lead to identity role confusion which can have a negative impact on

behaviour. Whitman, Borkowski, Keogh and Weed (2001:1) explain that sustained role confusion can lead to a state of identity diffusion that is marked by excessive self-centredness, self-doubt, distrust of others and emotional immaturity. Adolescents in the state of identity diffusion are often described as isolates who experience casual relationships that lack depth and commitment (Whitman et al., 2001:2). Heryan (2012:2) asserts that partly due to role confusion and diffusion, adolescent mothers can continue to engage in risk taking behaviours which sometimes expose them and their children to dangerous situations.

Heryan (2012:2) explains that when an adolescent decides to move away from home it can on one hand serve as a rite of passage to adulthood, but on the other hand by selecting an identity too quickly, the adolescent mother may become identity foreclosed. Whitman et al. (2001:2) assert that the foreclosed adolescent enters into a parenting role without having an opportunity to adequately experiment with other roles. Hence they may be less likely to feel comfortable in the parenting role and may be more likely to interact with their children in a rigid and stereotypical manner. In other words, foreclosed adolescent mothers are likely to parent in a way that is rigid and cold. It is partly because they become so self-centred and unreflective that their parenting roles leave a lot to be desired (Whitman et al., 2001:2).

Adolescent mothers are thus apparently less responsive and sensitive to their children, mostly due to the fact that they may not be ready for taking on parenting roles. As a result, the infants of adolescent mothers may suffer the consequences of inadequate parenting. The responsibility to take on and dedicate time to a baby can be quite overwhelming to an adolescent mother both physically and emotionally. Stanley and Swierzewsk (2012:1) explain that a baby holds the adolescent mother back from doing a lot of things, hence the baby-mother relationship may be negatively impacted upon. For example, when an adolescent mother wants to look for a job, someone else has to take care of her baby and that may not always be possible. Heryan (2012:2) contends that the adolescent mothers may develop feelings of resentment towards the infants, mostly because, rather than satisfying the adolescent mothers' unrealistic hopes, the infants have needs of their own.

The experiences of teenage pregnancy and motherhood may cause feelings of isolation and despair for the adolescent mother. Heryan (2012:2) posits that, for most adolescent mothers, time stands still because of doing almost the same things each day. The adolescent mothers may get frustrated with having to spend all their time caring for the baby. The adolescent

mothers also report feeling alone, isolated and abandoned by friends. They may thus view the world as consisting of people who do not understand or really listen to them.

The reality of teenage pregnancy and parenting influences the way adolescents view sexual behaviour and the world around them. Adolescent mothers, for instance, report that prior to becoming pregnant and having a child, their adolescent views of love, sex, romance and life's general demands were not like the reality of meeting the challenges of being a new parent (Devito, 2010:25). Some adolescent mothers realise that their future is far more important than becoming a mother. Devito (2007:16) asserts that some adolescent mothers become aware of the benefits of completing their education or of finding employment for their self-sustenance. Many adolescent mothers also perceive premarital sex as an enjoyable and acceptable activity among their peers, but they acknowledge that the potential outcome of sex (pregnancy and having a baby) requires more work than they had anticipated, hence their perceptions of parenting changed (Devito, 2007:16). The consequences of teenage pregnancy and parenthood are thus quite overwhelming for many adolescents.

3.3.3 The consequences of teenage pregnancy for the family

The family is a dynamic, interactive system with parents and children influencing each other (Kail & Cavanaugh, 2007:270). The interactive nature of the family system implies that family members interact or relate to each other and in that process they are capable of influencing one another. The family is a dynamic system because family contexts do not remain the same but are capable of changing, for instance, when an adolescent falls pregnant. Parke and Clarke-Stewart (2011:210) assert that a family system is a group of people composed of interdependent members and subsystems, thus changes in the behaviour of one member of the family, in this case the pregnant adolescent, can affect the functioning of the other members. Diller (2007:99) explains that there is an emphasis on harmonious interpersonal relationships, interdependence and mutual obligations or loyalty in most families for achieving a state of psychological homeostasis (balance) in the family. It may mean that when a teenage mother gives birth in the family, the demands of the new baby may cause a state of disequilibrium in the family system. It also implies that, as a result, family members may be forced to adjust themselves to maintain that balance or sustenance so badly needed in the family system. Grandmothers, for example, may be forced to adjust their everyday routines in order to give attention to the newborn baby and also to allow the teenage mother to continue going to school.

Newberry, Gallant and Riley (2013:17) acknowledge that the emotional, economic and social ramifications of teenage pregnancy can thus affect the entire family in significant and life-altering ways. When teenage pregnancy occurs in the family it can cause emotional instability in the family members. This is because teenage pregnancy is one of those life events that few families anticipate, and the effects of adolescent pregnancy can reach well beyond the young mother's life, impacting the lives of other family members in the process (Kail & Cavanaugh, 2007:270). Newberry et al. (2013:18) contend that many parents of a pregnant adolescent may perceive the occurrence of the pregnancy as a negative reflection on their own parenting skills; hence they may feel distressed and guilty. The parents may feel that they did not do enough to protect the teenage child from falling pregnant, hence they may blame themselves and their self-condemnation can make them feel emotionally unstable.

Whether the pregnancy is terminated, the baby is placed for adoption or the child is regarded as an unexpected, but welcome addition, teenage pregnancy still has emotional effects on the family (Newberry et al., 2013:18). Parental reactions to news of a teenage pregnancy, for instance, can include denial, guilt and anger, which are emotions often shared by the pregnant teenager herself. The pregnant teenager can become depressed about her pregnancy, and in so doing this can also have a negative impact on the family's overall emotional wellbeing. In other words, when the teenage mother is affected by her pregnancy or motherhood it also affects family members, especially parents and siblings. The young father and his family can also experience similar feelings especially when the pregnancy comes as a surprise.

Teenage pregnancy can have social implications for family members. Newberry et al. (2013:17) explain that a teenager's mother often steps in to raise her grandchild and her ability to rear her own children can be negatively impacted by these extra demands. Having a teenage parent in the family thus may prompt the new grandmother to increase the amount of attention she may be giving to her own children, but in most cases her expected obligations compromise her ability to care for her own offspring (Newberry et al., 2013:17). In other words, the new grandmother's caring role is overstretched by the addition of a teenage mother's baby (Adolescent Health, 2015:1). In this case there might be decreased parental focus on the part of the new grandmother to her own children.

Teenage pregnancy can be of great inconvenience to family members, especially if it forces them to change their plans for the future. The arrival of a newborn baby in the family may force family members to adjust some of their goals in life. The new grandparents might

postpone continuing education or midlife career shifts, for instance, in order to help their teenage daughter with child rearing obligations (Newberry et al., 2013:18). The teenage pregnancy can also have repercussions on the short term goals of the entire family (Boonstra, 2007:1). Short term goals such as planned vacations and outings may take a back seat to cater for the more pressing issues surrounding the birth and care of the baby (Newberry et al., 2013:18).

Teenage pregnancy can also have financial implications for the family (Parke & Clarke-Stewart, 2011:210; Bodeeb, 2015:1). Whether a teenage mother chooses to terminate her pregnancy, give her baby up for adoption or keep the baby, the pregnancy and birth create financial obligations that most often fall on the adolescent mothers' family (Voydanoff & Donnelly, 1990:80). Adolescent mothers may receive varying amounts of financial support and child rearing assistance from their parents or other kin and from the fathers of their children. Unmarried adolescents living with parents are thus most likely to rely on their parents for child care advice, financial and psychological support whilst they return to school (Voydanoff & Donnelly, 1990:80). Newberry et al. (2013:17) also explain that many employee insurance plans deny maternity benefits to dependents such as teenage mothers, and by so doing it leaves families of teenage mothers to bear the burden of prenatal and delivery expenses. Also, after the baby's birth, infant health care, combined with everyday expenses such as diapers, clothing and child care, add up to create a major impact on the family budget (Newberry et al., 2013:17). It therefore implies that the arrival of the teenage mother's baby does not only affect the teenager but the entire family.

3.3.4 The consequences of teenage pregnancy on the community

A community is a social group of any size whose members reside in a specific locality and thus may have common patterns of life (Munn, 2013:1; Leonard, 2014:1). A community is a collection of people who share common experiences. Common experiences may be reflected in the services they share such as health services like clinics or hospitals, shops, schools, recreational facilities, public transport, police services and banks. In this study a community refers to a small group of people. In such a small community, female adolescents are probably closely connected since they may be known by many people including peers, classmates, teachers, former school mates, relatives and many other adults.

Teenage pregnancy affects the individuals involved as well as the community at large. The high rates of teenage births can affect a community's economic base (Kamara, 2011:2). Most

teenage mothers do not complete school and hence are less likely to secure employment. It means that they may perpetuate a culture of poverty that may erode the economic resources of their communities. The Urban Child Institute (2014:1) explains that a less educated population and unskilled workforce negatively affects the economy, and makes it difficult for communities to break aggressive cycles of poverty and crime.

Teenage childbearing can contribute to moral degradation in the community especially by promoting irresponsible sexual behaviours and nonmarital childbearing among adolescent peers. Herzog et al. (2007:245) report that national figures indicate that many adolescent mothers are not married. Stapleton (2010:19) also explains that longitudinal studies reveal intergenerational transmission of parenting norms as evidenced by the substantial numbers of teenage mothers who are daughters of teenage mothers. It means that, when an adolescent falls pregnant and bears illegitimate children who grow up poor and abused, in most cases the children will also bear illegitimate children of their own. As a result, teenage pregnancy perpetuates a cycle of teenage childbearing in the community. In a school situation, for instance, the higher percentages of sexually experienced peers promote the modelling of irresponsible sexual behaviours. Adolescent mothers in schools are thus bad models since they can influence other peers to imitate irresponsible sexual behaviours. Stapleton (2010:16) explains that the problem of teenage childbearing has now been technically shifted from illegitimate to teenage motherhood thereby diluting the association of childbearing with marriage. The prevalence of teenage childbearing in communities is partly responsible for making marriage look insignificant, thereby promoting moral degradation (Collier, 2009:358).

The prevalence of adolescent childbearing can also promote an epidemic of other social problems such as criminality, drug abuse, alcohol abuse and promiscuity in the community. Most children of adolescents are likely to be unhealthy, poor and abused due to negligence and improper parental care associated with teenage parents. Eitzen and Zinn (2006:176) explain that inadequate child care and unstable family life eventually lead such children to drugs, gambling, drinking and criminality within their communities. Crane (1991:1226) explains that, by promoting antisocial behaviours such as promiscuity, drug abuse and criminality, adolescent childbearing is decreasing neighbourhood quality. Escarce (2003:1230) posits that low quality neighbourhoods which are normally characterised by poverty are more likely to have more crime, street violence, greater availability of illegal drugs and more negative peer influences or adult role models. When criminality increases it

is not only a security concern for community members but also a challenge to law enforcement agencies such as local police services in their bid to protect people.

Teenage childbearing in the community can also interfere with local teachers' professional work, let alone their emotional wellbeing. Vincent (2012:35) asserts that pregnant adolescents can affect school interactions because there is evidence of teacher discomfort not only when dealing with pregnant learners but also with sex and relationship education. When a teenage mother temporarily withdraws from school and later comes back, for instance, she will be behind with curriculum coverage, assignments and tests. Teachers will therefore be required to adjust their work plans to cater for such learners. In some instances, pregnant adolescents can develop pregnancy-related complications such as premature labour or even labour pains during school hours. In so doing, teachers and other learners may be affected emotionally in the process of assisting such learners.

3.3.5 The consequences of teenage pregnancy to society and the world

The negative outcomes of teenage pregnancy are multifaceted and complex since they do not only affect the individual, family or community, but the society and world at large. When teenage pregnancy affects the female adolescent, the consequences can translate into family outcomes such as emotional problems. The family consequences can also build up to form community risks which ultimately can also affect the world. In essence, whatever forms of impact teenage pregnancy may have on communities, they cumulatively add up to become national or global problems because a nation is made up of communities whilst nation states make the global world.

Teenage pregnancy has economic implications for nation states and governments. Research has indicated that the teenage mother and child are less likely to complete school and secure employment. It means that they are thus likely to be poor as adults and rely on public assistance (Adolescent Health, 2015:1; Eitzen & Zinn, 2006:176; Mkhwanazi, 2010:358). Negative economic costs of the teenage mother and her child thus impact the nation's economy. Culp-Ressler (2012:1) asserts that teenage pregnancy is highly likely to limit an adolescent's education and employment prospects hence it may lead to significant loss of earnings, particularly in tax revenue. This is probably because, if a teenage mother is of low socio-economic status, her tax contributions to the state are minimal, if not zero. Every nation in the world relies to a great extent on its citizens' tax contributions, especially from its workforce and business personnel. It means that the teenage mother and her child, who may

not contribute towards government revenue due to low socio-economic status, do more harm than good to the national economic prospects. Culp-Ressler (2012:1), in this regard, posits that it is estimated that over the course of her lifetime a single high school dropout costs the USA approximately \$260 000 in lost earnings, taxes and productivity. It means that a teenager who drops out of school is not productive and hence may contribute very little to the economy of the country.

Besides loss of earnings in tax revenues, teenage pregnancy can impact the national economy through increased public assistance payments such as child support grants, greater expenditure for public health care, foster care and criminal justice services (Culp-Ressler, 2012:1). Teenage pregnancy can impact public funding because many adolescents who fall pregnant go on welfare and working class citizens end up supporting the mother and child for a long period. National states also spend more on health delivery systems because teenage pregnancy is associated with more health risks for both the teenage mother and her child. Health complications that may occur in pregnant teenagers can thus cost the nation substantial amounts of money.

The government can also incur foster care expenses from teenage pregnancy especially if a teenager abandons or declares her inability to care for her baby. The government may pay foster care grants to people who take responsibility for caring for the baby. Adolescent pregnancy and childbearing can thus be costly to any government.

The prevalence of nonmarital sexual acts negatively impacts the social fabric of society. The prevalence of teenage childbearing, for instance, is creating a context of nonmarital childbearing in society. All aspects of adolescent development, be it sexual, social or moral developments occur within a social context which may either promote or hamper development (Louw & Louw, 2007:325). Eller (2009:17) also emphasises that culture is learned. The adolescents of today are susceptible to learning a culture of nonmarital childbearing because that is what they see happening around them. Plummer and Wight (2011:123) aptly posit that, according to the social constructionist theory, sexual acts, orientations and identities are constructed largely according to a society's culture at a given historical period. It means that in this historical period where teenage pregnancy is high, a fairly permissive sexual culture is being created in society.

Teenage pregnancy can also promote social inequities especially by its association with poverty. Paranjotly, Broughton, Adappa and Fone (2008:2) assert that one of the effects of

teenage pregnancy on society is its perpetuation of the widening gap in health and social inequalities. A teenage mother and her child are likely to be poor, mostly due to non-completion of schooling by the mother. As a result, teenage pregnancy can widen the gap between the poor and the rich in our communities. Resource deprivation, which may be promoted by teenage childbearing, can thus promote economic differences of people in a country, hence it promotes social inequality.

3.4 CONCLUSION

Adolescence is a complicated developmental phase. Besides experiencing biological and psychological changes, adolescents also experience dramatic social transitions that can influence their sexual behaviours. The adolescents of today live in a society undergoing intensive and rapid technological changes. The technological changes have increased the interconnectedness of the female adolescents to the rest of the world. Globalisation, for instance, which is primarily a process of increased interconnectedness and cultural exchanges on a global scale, has made it possible for female adolescents to exchange sexual values such as sexual freedom and independence. In so doing, they develop different meanings about adolescent sexuality and childbearing. Today's female adolescents are more able to share both a collective personality and a collective consciousness about adolescent sexuality than before, mostly through the global media and social networks. Media such as television have made sexual acts more explicit and tend to glamourise nonmarital sexual encounters. In the process of doing so, the media tend to be influencing female adolescents to develop positive attitudes about nonmarital sexual acts that can result in teenage pregnancies. Social network sites such as Facebook, WhatsApp, YouTube and Myspace have also created anonymous environments free of parental censorship, but with a prevalence of peer influence, to explore and express their sexuality. In the process of their freedom of exploration they encounter many possibilities or options relating to sexual relationships. Adolescents are influenced not to postpone or delay sexual activities but to explore possibilities that may make them fall pregnant.

On the other hand, cultural values and assumptions of most African female adolescents, for instance, have shown that there is no absolute reality nor is there a universally valid way of perceiving or thinking about adolescent childbearing in African societies. Some female adolescents view childbearing as a rite of passage to adulthood, whilst some believe that it confirms their fertility in their culture. Similarly, the most consistent factor for early

pregnancy is low socio-economic status. Low socio-economic status includes cultural, economic, educational and resource deprivation. Social deprivation creates a context in which the female adolescent may not see a bright future. These assumptions have influenced female adolescents to find no reason to delay childbearing.

Teenage pregnancy as an ecological problem can impact the various layers of the ecosystem such as the female adolescent as an individual, her family, community, society and the world as a whole. Teenage pregnancy can have economic, behavioural, social, health and emotional implications for the various subsystems of the ecosystem. The female adolescent and her child, for example, may not complete school which, in turn, makes them unable to secure employment. As a result, they may lead a life of poverty. Poverty may force them to rely on public assistance, which may affect the economic position of their communities and countries. The behavioural problems of the female adolescent child in particular can also culminate in criminality, which inevitably affects their communities and society at large. Some of the African cultural values, globalisation, low socio-economic status, the media and social networks can influence the adolescent to develop positive attitudes towards early sexual activity and childbearing. The apparent reciprocal nature of teenage pregnancy thus manifests itself when it impacts on the female adolescent, her family and ultimately the global world as a whole. The next chapter will focus on the research design and methodology.

CHAPTER FOUR

RESEARCH DESIGN AND METHODOLOGY

4.1 INTRODUCTION

Research is one of many different ways of knowing or understanding human experiences and perceptions about a phenomenon, such as the female adolescents' experiences and perceptions of teenage pregnancy, researched in this study. Mertens (2010:2) asserts that "research is conducted for a variety of reasons including to understand, describe, predict or control an educational or psychological phenomena or to empower individuals in certain contexts". Seale, Gobo, Gubrium and Silverman (2004:161) note that in order to understand how one can, for instance, motivate teenagers who fall pregnant, we need to know what the lived experience of teenage pregnancy and motherhood is like for them, what it reminds them of, and what it feels like to be pregnant. This study was thus premised on the belief that female adolescents have experiences and perceptions of teenage pregnancy and it may be prevented if the researcher could understand these premises. Schram (2003:70) reports that perceptions present researchers with evidence of the world not as it is thought to be but as it is lived. The study thus aimed to gain an in-depth understanding of the female adolescents' experiences and perceptions of teenage pregnancy in order to extend the knowledge base related to teenage pregnancy as well as to come up with strategies of lessening the prevalence of the phenomenon.

The literature review carried out in chapters two and three provided an overview of the research about the phenomenon of teenage pregnancy as a preliminary step in the researcher's preparation for the empirical investigation. In chapter two, discussions focused on the bi-directional influences of teenage pregnancy and adolescent development at the micro level of the Ecological Systems. Chapter three, on the other hand, discussed the contributing factors and causes of teenage pregnancy at the macro level of the Ecological Systems as well as the implications of teenage pregnancy on the individual, family, community and the world at large. The literature study mostly indicated general information applicable to all cultural groups. However, the empirical research concentrated on the female adolescents' experiences and perceptions of teenage pregnancy in an African context, thus African female adolescents in rural, farm and semi-urban environments.

This chapter introduces and discusses the research process which was used to explore the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The chapter begins by outlining the main research question and sub-research questions discussed in chapter one in order to bring the research into context. The chapter discusses the explorative research design, the qualitative research approach and the phenomenological paradigm which were adopted in this research to explore the female adolescents' experiences and perceptions of teenage pregnancy. The different types of interview techniques are explained but with special reference to the semi-structured interview technique that was adopted as the main data gathering tool in this study. Ethical considerations and techniques for establishing trustworthy findings are explained. Tesch's method of data analysis which guided the researcher in analysing the data in this study is also presented.

The next section outlines the main research question and sub-research questions of the study.

4.2 THE PROBLEM STATEMENT

4.2.1 The main research question

The main research question that delineated the focus of this study was: **What are female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga?**

4.2.2 The sub-research questions

The general aim of this study was to do a literature review and an empirical study about female adolescents' experiences and perceptions of teenage pregnancy. The following sub-questions helped the researcher throughout the study:

- (i) How do the developmental phases in adolescence influence teenage pregnancy?
- (ii) How does teenage pregnancy have an impact on adolescent development?
- (iii) What are the contributing factors and conditions that promote teenage pregnancy?
- (iv) What are the consequences of teenage pregnancy?
- (v) How do female adolescents perceive the experience of teenage pregnancy?

The literature review only partly answered the sub-research questions. An empirical study was therefore also necessary to develop a greater understanding of the phenomena at hand. The empirical study was carried out at three secondary schools in Belfast, Mpumalanga in

South Africa and it helped to put the research study into context. The next section outlines how the empirical research study was conducted and it includes discussions on the research design, approach and paradigm.

4.2.3 Aims of the study

4.2.3.1 General aim

To do a literature review and empirical study about female adolescents' experiences and perceptions of teenage pregnancy.

4.2.3.2 Specific aims

To do a literature review on:

- (i) The developmental phases in adolescence and their influence on teenage pregnancy.
- (ii) Teenage pregnancy and its impact on the developmental phases of adolescents.
- (iii) The contributing factors and conditions that promote teenage pregnancy.
- (iv) The consequences of teenage pregnancy.
- (v) Adolescents' perceptions of their experience of teenage pregnancy.

To conduct an empirical study on:

- (i) The developmental phases of adolescence and their influence on teenage pregnancy in Belfast, Mpumalanga.
- (ii) The impact of teenage pregnancy on the developmental phases of female adolescents in Belfast, Mpumalanga.
- (iii) The contributing factors and conditions that promote teenage pregnancy amongst adolescent female learners in Belfast, Mpumalanga.
- (iv) The consequences of teenage pregnancy amongst the adolescent female learners in Belfast, Mpumalanga.
- (v) How female adolescents in Belfast, Mpumalanga perceive the experience of teenage pregnancy.

4.3 RESEARCH DESIGN, APPROACH AND PARADIGM

4.3.1 Research design

A research design refers to the overall strategy that integrates the different components of a study in a coherent and logical way, thereby effectively addressing the research problem (Labaree, 2009:1). Terre Blanche, Durrheim and Painter (2002:29) contend that “a research design is a strategic framework for action that serves as a bridge between planning and the execution or implementation of the research”. In other words, a research design is a plan that guides the way research can be conducted. It constitutes a blueprint for the collection, measurement and analysis of data (Ben-David, 2011:139; Labaree, 2009:2). A research design reflects the purpose of the inquiry, which may be a descriptive, exploratory or explanatory research design (Kowalczyk, 2003:1). In this study the exploratory research design was used to determine the way the research should be conducted and the methods for data collection and analysis to explore the female adolescents’ experiences and perceptions of teenage pregnancy.

4.3.1.1 The exploratory research design

Burns and Grove (2003:313) define an exploratory research design as research conducted to gain new insights, discover new ideas and/or increase knowledge of a phenomenon. Brown (2006:43) concurs by asserting that an exploratory research design tends to tackle new problems on which little or no previous research has been done, thus it is mostly conducted in a case where the problem has not been clearly defined.

An exploratory research design involves investigating a problem or situation which provides insight to the researcher (Saunders et al., 2007:134; BusinessDictionary.com, 2016:1). In other words, the researcher has an idea but seeks to understand more about the phenomenon.

Babbie, Mouton, Vorster and Prozesky (2001:80) explain that an exploratory study is conducted for a variety of reasons that include for instance, to satisfy the researcher’s curiosity and desire for better understanding, to test the feasibility of undertaking a more extensive study, to develop the methods to be employed in any subsequent study, to explicate the central concepts and constructs of a study and to determine priorities for future research. Kowalczyk (2003:1) concurs by asserting that an exploratory research design mostly lays the groundwork for further research.

In other words, exploratory research is a methodological approach that is primarily concerned with discovery and with generating or building theory (Davies, 2006:1). An exploratory research design thus helps in diagnosing a situation, screening of alternatives and discovering new ideas (Conroy, 2003:1). Exploratory research helps to explore how people get along in the setting under question, what meanings they give to their actions and what issues concern them, such as the female adolescents' experiences and perceptions of teenage pregnancy researched in this study.

Whilst an exploratory research design generates new ideas and assumptions that may give direction for future research, Brown (2006:1) notes that it does not aim to provide the final and conclusive answers to the research questions but merely explores the research topic with varying levels of depth.

The purpose of this study was to gain an understanding into the phenomenon of teenage pregnancy as experienced by female adolescents. The researcher aimed to explore the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The researcher had an idea about the phenomenon of teenage pregnancy but wanted to understand more about it through exploring the female adolescents' experiences and perceptions. Exploratory focus was thus valuable in this study because the researcher believed that possible insights would be produced, such as familiarity with basic details of the female adolescents' experiences and perceptions as well as the generation of new ideas and assumptions about the phenomenon of teenage pregnancy. In other words, the researcher believed that the exploratory nature of this qualitative study would hopefully lead to the development of new concepts or theories about teenage pregnancy.

Singh (2007:64) posits that exploratory research helps to determine the sampling and data collection methods. In this study, the researcher explored the female adolescents' experiences and perceptions of teenage pregnancy; hence 20 female adolescent learners were purposefully sampled to participate in the study. The logic and power of purposeful sampling lies in selecting rich cases for study in depth (Denzin & Lincoln, 2005:134). The researcher believed that the female adolescent learners who experienced teenage pregnancy to full term would provide the richest and most detailed information to help answer the research questions of the study.

Exploratory research involves secondary research such as reviewing available literature, but also relies on more formal approaches such as in-depth interviews, focus groups and case

studies (Davies, 2006:2). In this study, a literature review was carried out to ascertain the current state of knowledge, to establish key findings and to identify knowledge gaps in the area of teenage pregnancy. The literature review also served to compare and to combine findings from the empirical data with literature (see chapter six). The researcher believed that the African female adolescents' experiences and perceptions were one of the missing links for better understanding of the phenomenon of teenage pregnancy; hence there was a need for a systematic inquiry into their experiences and perceptions in their natural settings. Since the literature review partly answered the research questions, the empirical component of the study was thus meant to bring more insight to the researcher about the female adolescents' experiences and perceptions of teenage pregnancy in an African context. The researcher carried out in-depth semi-structured interviews with 20 female adolescent participants in order to explore further the female adolescents' experiences and perceptions of teenage pregnancy in an African context, thus African female adolescents from farm, rural and semi-urban environments in South Africa.

Cuthil (2002:79) explains that exploratory research is flexible and can address research questions of all types such as what, why and how questions. In this research the focus was on what and how questions, which were meant to understand the perceptions and meanings of adolescent females about their experiences of teenage pregnancy (see sub-research questions). The researcher therefore entered the research field with curiosity from the point of not knowing and was keen to provide new data regarding the phenomenon of teenage pregnancy (Burns & Grove, 2003:313). The next section discusses the research approach of this study.

4.3.2 Research approach

There are two basic approaches to a research problem, namely quantitative and qualitative approaches (Kowalczyk, 2003:1; Homework Help, 2011:1). Whilst the two approaches have different purposes, Creswell (2014:32) cautions that quantitative and qualitative approaches should not be viewed as rigid and polar opposites, instead they represent different ends on a continuum. It implies that one approach can complement the other. In this study the researcher, however, used the qualitative approach because it allowed the researcher to have a deeper understanding of a phenomenon such as the female adolescents' experiences and perceptions of teenage pregnancy researched in this study. A brief outline of the quantitative

approach is also given to clarify why the qualitative approach was more suitable for this study.

4.3.2.1 The quantitative research approach

In natural and social sciences, quantitative research is the systematic empirical investigation of observable phenomena via statistical, mathematical or computational techniques (Creswell, 2003:18; James et al., 2012:190). Labaree (2009:1) also posits that “quantitative methods emphasise measurements and the statistical, mathematical, or numerical analysis of data collected through polls, questionnaires and surveys, or by manipulating pre-existing statistical data using computational techniques”. The quantitative approach thus subscribes to the positivist paradigm which explains events through knowable facts, causes and effects, objective observation and absolute knowledge (Creswell, 2003:18; James et al., 2012:190). In other words, quantitative research generates numbers rather than words and the data gathering methods such as questionnaires do not promote active engagement between the researcher and the participants. This approach can thus provide a measure of what people think from a statistical and numerical point of view and can gather a large amount of data that can easily be organised and manipulated into reports for analysis (Cresswell, 2009:23; Labaree, 2009:1). The findings of quantitative research are mostly representative of the broader population and can thus be generalised. Whilst quantitative research is objective and generalisable to the larger population, it often lacks depth which the researcher needed in this study. In this study the researcher needed deeper understanding and interpretation of the female adolescents’ experiences of teenage pregnancy and thus preferred the qualitative research approach.

4.3.2.2 The qualitative research approach

The exploratory qualitative research design was applied in this study primarily because its focus is to explore and understand the meanings individuals or groups ascribe to a social problem such as teenage pregnancy (Ben-David, 2011:139). The researcher chose a qualitative research approach for this study in order to gain an in-depth understanding of the experiences and perceptions of teenage pregnancy from the perspectives of African female adolescents. Denzin and Lincoln (2005:3) give a generic definition of qualitative research:

Qualitative research is a situated activity that locates the observer in the world. It consists of a set of interpretive material practices that make the world visible (multi-method in nature). These practices transform the world. They turn the world into a series of representations, including field notes, interviews, conversations, photographs, recordings and memos to the self. Qualitative researchers study things in their natural settings, attempting to make sense of or interpret phenomena in terms of the meanings people bring to them.

Qualitative research was appropriate for this study because it involves an interpretive, naturalistic approach to the world which allowed the researcher to explore the female adolescents' experiences and perceptions of the phenomenon of teenage pregnancy within their natural settings (see Mertens, 2010:225; Wertz, Charmaz, McMullen, Josselson, Anderson & McSpadden, 2011:52). Maxwell (2013:28) contends that the goal of qualitative research is to understand the meanings, experiences and situations of participants in the study. The researcher believed that female adolescents have certain perceptions, meanings and constructs about their experiences of teenage pregnancy which warranted further research. The qualitative research approach thus allowed the researcher to become actively involved with participants in order to understand their perspectives.

Denzin and Lincoln (2005:134) explain that qualitative researchers focus on the study of social phenomena and on giving voice to the feelings and perceptions of the participants under study. It was therefore suitable for this study which aimed to give voice to the feelings, meanings and perceptions of African female adolescents about the phenomenon of teenage pregnancy.

Qualitative research is also based on the belief that knowledge is derived from a social setting and that understanding social knowledge is a legitimate scientific process (Cresswell, 2014:237; Jacob, 2012:1-10). In this regard the qualitative research approach and the phenomenological paradigm discussed in the next section are associated with the social constructivist paradigm which emphasises the socially constructed nature of reality. The social constructivist paradigm is about recording, analysing and attempting to uncover the deeper meaning and significance of human behaviour and experience, including contradictory beliefs, behaviours and emotions (Delamont, 2012:14; Mertens, 2010:16; Lodico, Spaulding & Voegtler, 2010:14). According to the social constructivist perspective, knowledge is socially constructed by people active in the research process and researchers should attempt to understand the complex world of lived experience from the point of view of those who live it (Mertens, 2010:16). The intent of the researcher was to allow information to emerge from

the female adolescents in Belfast, Mpumalanga, in South Africa; hence the qualitative approach was relevant to this study. The qualitative researcher is interested in gaining a rich and complex understanding of people's experiences and not in obtaining information which can be generalised to other larger groups (Creswell, 2009:23). The focus in this study was not to generalise findings to the larger population of female adolescents, but to understand female adolescents' experiences and perceptions of teenage pregnancy within their natural and social settings in Belfast, Mpumalanga in South Africa (see Lodico et al., 2010:14; Denzin & Lincoln, 2005:3).

The researcher's preference for the qualitative research approach was also prompted by its focus on persons that are often silenced or overlooked, such as the African female adolescent mothers involved in this study (see Denzin & Lincoln, 2005:135). The researcher believed that African female adolescent mothers had not been given enough space to describe, interpret and speak out their convictions about their experiences of the phenomenon of teenage pregnancy. The qualitative research approach was thus suitable for this study which focused on the social phenomenon of teenage pregnancy in order to give voice to the feelings and perceptions of African female adolescents in Belfast, Mpumalanga in South Africa.

The approach also allows multiple sources of data and the researcher is the key instrument for data collection (Creswell, 2014:234). According to Creswell (2014:237), the qualitative researcher is a key instrument for data collection because qualitative research is interpretive; hence the inquirer is typically involved in a sustained and intensive experience with participants. It is in this regard that the researcher collected data himself through interviewing participants individually.

Data analysis in qualitative research also consists of preparing and organising data for analysis, then reducing the data to themes through a process of coding and finally representing the data for discussion (Babbie et al., 2001:67; Creswell, 2007:148). Creswell (2014:185) also posits that qualitative data analysis is normally inductive and qualitative researchers build their patterns, categories and themes from the bottom up by organising the data into increasingly more abstract units of information. In other words, data in qualitative research inductively builds from particular to general themes (Thorne, 2000:68). The qualitative data analysis process was thus appropriate for this study.

The qualitative research approach mostly employs emerging designs which means that the research process for qualitative research is flexible (emergent). It implies that the initial plan

for qualitative research cannot be as tightly presented as in quantitative research and thus some or all phases of the process may change or shift (Creswell, 2014:234) to allow the phenomenon to speak for itself. The intent of the qualitative researcher is to allow information to emerge from the participants. To convey an open and emerging design, the researcher thus took into account the need for flexibility in the research process by making use of semi-structured open-ended interview questions. In the entire qualitative research process, the researcher focused on exploring and learning the meanings that the female adolescents held about teenage pregnancy and not the meanings that the researcher brought to the research or those in the literature (see Thorne, 2000:70; Creswell, 2014:234), to avoid biasing the data. In the next section the research paradigm is discussed.

4.3.3 Research paradigm

A paradigm, according to Guba and Lincoln (1994:110), may be viewed as a set of basic beliefs that deals with ultimates of first principles. It represents a worldview that defines the nature of the world, the individual's place in it and the range of possible relationships to that world and its parts (Guba & Lincoln, 1994:110). A paradigm represents the way a person views the world and reality. In this study the researcher utilised the phenomenological paradigm.

4.3.3.1 Phenomenology

Mastin (2008:1) gives the definition of phenomenology as follows:

Phenomenology is a broad discipline and method of inquiry in philosophy, developed largely by the German philosophers Edmund Husserl and Martin Heidegger, which is based on the premise that reality consists of objects and events (phenomena) as they are perceived or understood in the human consciousness and not of anything independent of human consciousness.

Phenomenological research methods grew out of the philosophical frameworks of existentialism and phenomenology which emphasise that humans seek meaning from the experiences in their lives (Denzin & Lincoln, 2005:148). Fischer (2006:81) asserts that making conscious experience accessible to the researcher is the hallmark of phenomenology. In other words, phenomenology describes the 'what' and 'how' of individuals' experiences of phenomena (Fischer, 2006:81; Denzin & Lincoln, 2005:37). Pietkiewicz and Smith (2014:7) assert that Husserlian phenomenology, for instance, primarily focuses on how people perceive and talk about events rather than describing phenomena according to a

predetermined categorical system or scientific criteria. This involves bracketing one's preconceptions and allowing phenomena to speak for themselves (Callary et al., 2015:66).

Mills and Birks (2014:183) explain that Martin Heidegger (1889-1976), Husserl's student, developed phenomenology from a descriptive to an interpretive endeavour (hermeneutical or existential phenomenology). According to hermeneutics (from the Greek word to interpret or to make clear), one needs to comprehend the mindset of a person and their language which mediates one's experiences of the world, in order to translate his or her message (Pietkiewicz & Smith, 2014:8). In this case, interpretation, as noted by Mills and Birks (2014:184), becomes an attempt to develop a deeper understanding and to bring that which is hidden to the forefront. In other words, the interpretive phenomenology emphasised by Heidegger is in essence a refinement of the original phenomenology developed by Husserl.

Wertz et al. (2011:52) explain that phenomenology is not always used in reference to the tradition begun by Husserl in European philosophy. In psychology the word has been used more broadly to characterise any work in research theory or practice that emphasises first person experience (Wertz et al., 2011:52). It is in this regard that the researcher adopted the phenomenological paradigm to explore the first person experiences of teenage pregnancy by African female adolescents. The purpose of the phenomenological inquiry in this study was to uncover meanings and articulated essences of meaning (Creswell, 2014:185) through exploring the African female adolescents' perceptions of the lived experiences of teenage pregnancy.

Because of its focus on lived experiences and the meanings constructed by people due to their circumstances, both the phenomenological paradigm and the qualitative approach employed in this study subscribe to the social constructivist perspective which argues that reality is socially constructed by individuals and this social construction leads to multiple meanings (Mills & Birks, 2014:20, Lodico et al., 2010:14). The researcher believed that the African female adolescents in this study had social constructions of the reality of teenage pregnancy in an African environment but with access to the global world, hence were likely to have multiple meanings and perceptions of the phenomenon.

Groenewald (2004:1) postulates that the phenomenological paradigm focuses on conscious experience, that is, experiences from the first person point of view. Hence phenomenology subscribes to the view that during interaction with various phenomena, human beings interpret them and attach meanings to different actions and/or ideas and thereby construct

new experiences. In this regard the phenomenological researcher should develop an empathic understanding to know the process of interpretation by individuals so that she/he can reproduce in her/his mind feelings, motives and thoughts that are behind the action of others. In this study, the researcher believed that one way of understanding the interpretations of African female adolescents was to explore their experiences and perceptions of teenage pregnancy.

The phenomenological approach was therefore appropriate for this study because the primary goal of the researcher was to explore how African female adolescents made sense of their experiences of teenage pregnancy. The study focused on making the African female adolescents' conscious experiences of teenage pregnancy accessible to the researcher (Fischer, 2006:81) through exploring their experiences and perceptions of the phenomenon. The researcher's focus was to get closer to the African female adolescents and their circumstances (Schram, 2003:7) in order to understand the complex world and constructed reality from the point of view of those African female adolescents who live it.

The researcher believed that female adolescents are self-reflective and self-interpretive beings, hence the meanings they attached to teenage pregnancy needed to be explored and to be interpreted. Griffith (2009:44) underscores the point that it is crucial that the researcher does not interpret more than what the participants have provided because biased data compromises the credibility of findings. In this regard the researcher bracketed his presuppositions of the phenomenon of teenage pregnancy to minimise bias.

Griffith (2009:44) explains that phenomenology is inductive, just like all qualitative approaches, because it allows for unanticipated or unpredicted themes to emerge during the analysis rather than focusing on testing predefined theories. In this regard the phenomenological paradigm was appropriate for this study because the researcher was able to allow unanticipated themes to emerge, especially through the use of open-ended semi-structured interview questions (which are flexible). In so doing the participants had freedom to express their views.

4.4 DATA COLLECTION

According to Hycner (1999:156) "the phenomenon dictates the method including the type of participants". In this study, the phenomenon of teenage pregnancy guided the researcher in

data collection. This section outlines the selection of participants, data collection methods and procedures.

4.4.1 Sampling

A sample is a small representative segment of a population. Sampling is the process of selecting units (e.g. people and organisations) from a population of interest so that by studying the sample a researcher may fairly generalise results to the population (Trochim, 2006:1). Sampling is thus a process in which a researcher chooses her/his sample from a larger defined target group such as female adolescent learners in this study. A sample can have a profound impact on the outcome of research especially in terms of quality of information needed to answer research questions; hence it was necessary for the researcher to select the most suitable sampling methods that were appropriate for this study.

In this study the researcher adopted a non-probability sampling technique. Non-probability sampling does not involve random selection as in probability sampling (Trochim, 2006:1), thus participants are selected on the basis of their likelihood to supply adequate information for the study. Non-probability samples are usually smaller as compared to probability samples hence they do not represent the population so well to allow generalisation (Trochim, 2006:1). Small samples (that are associated with non-probability samples) promote the study of a phenomenon in-depth.

Trochim (2006:1) asserts that there are two broad types of non-probability sampling techniques and they are accidental/convenient and purposive sampling. Denzin and Lincoln (2005:34) explain that purposive sampling involves the selection of participants who have key knowledge or information related to the purpose of the study. In this study a non-probability purposive sampling was applied where adolescent female learners who were likely to be knowledgeable and informative about experiencing teenage pregnancy were selected to address the purpose of the study. Purposive sampling techniques ensure a homogeneous sample of participants with common characteristics and experiences such as the female adolescent mothers in this study (Callary et al., 2015:65). Purposive sampling groups participants according to preselected criteria relevant to a particular research question. The female adolescents, learning at number 1, number 2 and number 3 secondary schools in Belfast, Mpumalanga in South Africa, were the relevant participants to address the research questions in this study by virtue of their first person experiences of teenage pregnancy.

In purposive sampling, a researcher samples with a purpose in mind, such as to explore the female adolescents' experiences and perceptions of teenage pregnancy, in this study. Female adolescents who experienced pregnancy to full term with the knowledge of parents/guardians and their three schools were the focus population of the study. The researcher asked for permission from the schools' management to present the research to the school population of female adolescents in general (Grade 10-12 female adolescents, 16 years and older). The researcher believed that the upper grades were more fluent in English and would hopefully be able to express their experiences and perceptions better in English. The researcher informed the female adolescents of the exact focus of the research and why the research could be of importance to all female adolescents (purpose of the research). He explained the ethical considerations such as confidentiality and anonymity. The researcher then asked for self-volunteers to participate in the study. Only adolescents who were willing to participate were selected. Adolescents who were willing to participate were asked to contact the researcher confidentially by completing a form with their contact details or by phoning the researcher with their details.

The researcher selected 20 self-volunteered participants through non-probability purposive sampling for individual interviews. The sample size thus consisted of female adolescents who experienced pregnancy to full term whilst still at school with the knowledge of their parents/guardians and their respective schools. The three secondary schools are in Belfast, Mpumalanga in South Africa. The participants were above 16 years of age and from Grades 10, 11 and 12. Five participants were selected from Grade 10: two from number 1, two from number 2 and one from number 3 secondary schools. Six participants were selected from Grade 11: two from number 1, two from number 2 and two from number 3 secondary schools. Nine participants were selected from Grade 12 with each school providing three participants.

Smith, Flowers and Larkin (2009:49) contend that a small sample size is acceptable because phenomenology is mainly concerned with understanding particular contexts. The qualitative researcher's primary concern is to study individuals in their natural context with little interest in generalising the results beyond the contexts of the participants. In this study, the researcher's interest was to explore the African female adolescents' experiences and perceptions of teenage pregnancy in their natural settings in Belfast, Mpumalanga in South Africa. The goal of qualitative researchers is to select persons, places, or things that can provide the richest and most detailed information to help in answering the research questions

(Denzin & Lincoln, 2005:134); hence a small sample of 20 participants in this study was ideal to allow the researcher to study the phenomenon in depth. Ben-David (2011:145) explains that qualitative researchers seek not only to identify behaviour but to understand the meaning of the participants' behaviour in an in-depth manner; hence it was important to select a small sample of 20 self-volunteered participants to allow their perceptions to be explored in depth. The focus of the study was to specify the condition under which the phenomenon of teenage pregnancy existed, including the actions/interactions that pertained to participants (female adolescent mothers) and the associated outcomes and consequences (see Seale et al., 2004:451).

In order to obtain rich cases, Ezzy (2002:74) explains that purposeful sampling should also take into account maximum variation. "Maximum variation involves detecting cases within extreme situations as for certain characteristics or cases within a wide range of situations in order to have all possible situations" (Seale et al., 2004:448). In this study, the female adolescent learners who experienced teenage pregnancy ranged from Grades 10 to 12 and were also from different ethnic groupings in an African community. The wide range of grades (10-12) of the participants naturally incorporated a diversity of ethnic backgrounds which was necessary to promote maximum variation.

Table 4.1: Profile of participants

| Participant Pseudonym | Grade | Age | Cultural affiliation |
|------------------------------|--------------|------------|-----------------------------|
| Nobuhle | 10 | 19 | Isiswati |
| Gugu | 10 | 19 | Isiswati |
| Thulisile | 10 | 22 | IsiZulu |
| Thando | 10 | 18 | IsiNdebele |
| Pretty | 10 | 20 | IsiZulu |
| Apiwe | 11 | 20 | IsiZulu |
| Lebo | 11 | 18 | IsiZulu |
| Nicole | 11 | 18 | IsiZulu |
| Harmony | 11 | 17 | IsiZulu |
| Nqobile | 11 | 22 | IsiNdebele |
| Busi | 11 | 21 | IsiZulu |
| Gloria | 12 | 19 | IsiZulu |
| Mpunza | 12 | 20 | Isiswati |
| Nomasonto | 12 | 18 | IsiZulu |
| Precious | 12 | 23 | IsiNdebele |
| Intelligence | 12 | 18 | Sepedi |
| Makhula | 12 | 22 | IsiNdebele |
| Xoliswa | 12 | 18 | IsiZulu |
| Angel | 12 | 20 | IsiZulu |
| Rethidisitshwe | 12 | 19 | SeSotho |

4.4.2 Data collection method

Banyard and Grayson (2008:444) posit that “the academic discipline of psychology is grounded on empirical inquiry and empirical enquiry is any kind of research which involves collecting data”. Mertens (2010:351) asserts that the purpose of data collection is to learn something about people or things. So the qualities of data collection are of paramount importance in any research. In this research the purpose of data collection was to explore the female adolescents’ experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The female adolescents had firsthand lived experiences of the phenomenon of interest in this research, which was teenage pregnancy, thus it was necessary for the researcher to collect data as procedurally and systematically as possible in order to come up with credible findings.

Before data collection, the researcher took into consideration a number of key factors that were necessary for data collection in this study. The exploratory design, qualitative approach and phenomenological paradigm, for instance, require researchers to use data collection methods that bring them closer to the participants by use of techniques such as in-depth observation, life histories, interviews, videos and pictures (Lodico et al., 2010:14). In order to come closer to the participants as well as to allow for an open-ended description of their experiences and perceptions of teenage pregnancy, the researcher used semi-structured interviewing.

The exploratory research design and qualitative research approach also allow the researcher to use more than one method of data collection in the same study in order to compare findings obtained through multiple methods as well as for triangulation of findings (Cresswell, 2009:175; Lodico et al., 2010:35). In other words, triangulation is the process of comparing findings from different data collection methods, thus adding thoroughness, richness, and depth of understanding to the study (Lodico et al., 2010:35). The researcher applied individual interviewing as well as literature study to facilitate triangulation and member checking. Member checking is a process which includes confirmation of results from participants to ensure accuracy of information collected. As a measure for member checking, the researcher sent summaries of findings to some of the participants for review (Denzin & Lincoln, 2005:169).

Terre Blanche et al. (2002:45) assert that data is the basic material with which a researcher works, hence the need to collect them as procedurally and systematically as possible. Matlala

(2011:129) also posits that, in qualitative research, the researcher is the instrument of data collection. It means that because qualitative researchers collect data themselves, through examining documents, observing behaviour or interviewing participants (Creswell, 2014:234), they are key instruments of data collection. The researcher took into account the fact that, since he had adopted a qualitative research approach in this study, he was supposed to be a significant role player in data collection, through active interactions with participants. Active engagement with female adolescent participants during interview sessions in this study was meant to get as much information as possible.

Mills and Birks (2014:188) assert that the aim of the phenomenological paradigm is to generate understanding of the essential nature of a particular phenomenon under study. According to the phenomenological paradigm adopted in this research, one way of coming to know about the essential nature of a phenomena is through those people who have had the lived experiences - particularly firsthand lived experiences - of the phenomenon of interest (Mills & Birks, 2014:188; Cresswell, 2007:58), such as teenage pregnancy.

In order to come up with credible findings, a qualitative researcher should employ suitable data collection methods such as observation, interviewing, focus groups and case studies (Creswell, 2003:18). This study primarily employed individual semi-structured interviews to allow the researcher to explore the phenomenon of teenage pregnancy in depth.

4.4.2.1 Interviews

“Researchers may use many different techniques of collecting data, but at the heart of qualitative research is the desire to explore the human part of a story” (Jacob, 2012:10). In this regard, the researcher used interviews to explore the female adolescents’ experiences and perceptions of teenage pregnancy. Interviews and focus groups are the most common methods of data collection used in qualitative research because they can be used to explore the views, experiences, beliefs and motivations of individual participants (Gill, Stewart, Treasure & Chadwick, 2008:291). Interviewing involves verbally asking questions and getting answers from participants in a study (Cohen & Crabtree, 2006: 1). Interviews usually involve a transfer of information from interviewee to interviewer, which is usually the primary purpose of the interview, although information transfers can happen in both directions simultaneously (Gill et al., 2008:291).

Interviewing has a variety of forms, for example, individual face-to-face interviews and focus group interviews. There are also three fundamental types of research interviews namely

structured, semi-structured and unstructured interviews (Gill et al., 2008:291; Cohen & Crabtree, 2006:1). In this research, individual face-to-face semi-structured interviews were used to explore the female adolescents' experiences and perceptions of teenage pregnancy.

(a) Unstructured interviews

Cohen and Crabtree (2006:2) explain that unstructured interviews allow researchers to focus on the respondent's talk on a particular topic of interest; hence they are often used in qualitative research. It may allow researchers the opportunity to explore the participant's preliminary understanding of a phenomenon, but also allows for ample opportunity for the participants to have, for instance, an in-depth exploration of the phenomenon of interest (Cohen & Crabtree, 2006:2).

Whilst unstructured interviews are characterised by limited researcher control of participants because of lack of structure, they nevertheless provide immense depth of information because they allow participants to express themselves without limitations such as in structured interviews. Gill et al. (2008:291), however, caution that "because unstructured interviews do not reflect any preconceived theories or ideas and are performed with little or no organisation, their lack of predetermined interview questions provides little guidance on what to talk about which many participants find confusing and unhelpful". One other challenge of unstructured interviews is that they are time consuming, probably because interviewees rather than the interviewer determine the direction of the interview.

(b) Structured interviews

Gill et al. (2008:291) give a description of structured interviews as follows:

Structured interviews are, essentially, verbally administered questionnaires, in which a list of predetermined questions is asked, with little or no variation and with no scope for follow-up questions to responses that warrant further elaboration. Consequently, they are relatively quick and easy to administer and may be of particular use if clarification of certain questions are required or if there are likely to be literacy or numeracy problems with the respondents. However, by their very nature, they only allow for limited participant responses and are, therefore, of little use if 'depth' is required.

It means that structured interviews (e.g. surveys) are data collection methods used mostly in quantitative research. They often require many participants' responses to promote representativeness of the population. Structured interviews are objective, reliable, take little

time and are much easier to administer (O’Leary, 2005:116). However, because they are often predetermined by the researcher, they are rigid and inflexible and thus often lack depth.

(c) Semi-structured interviews

In this study, the researcher employed individual semi-structured interviews. According to Pietkiewicz and Smith (2014:7) “the primary aim of phenomenology is to elicit rich, detailed and first person accounts of experiences and phenomena under study”. A semi-structured, in-depth one-on-one interview is the most popular method to explore a phenomenon in depth, although other alternatives of data collection can also be used such as focus groups (Pietkiewicz & Smith, 2014:8). Pietkiewicz and Smith (2014: 8) explain that:

Semi-structured interviews allow the researcher and the participants to engage in a dialogue in real time. They also give enough space and flexibility for original and unexpected issues to arise, which the researcher may investigate in more detail with further questions.

Semi-structured interviews were appropriate for this study because they facilitate rapport/empathy (Crotty, 1998:43) which means that researcher/participant relationship and understanding is enhanced through direct interaction between them. In this research it was important to establish rapport with female adolescents to enable them to explore the phenomenon of teenage pregnancy without fear. Semi-structured interviews allow greater flexibility of coverage, allow the interviews to go into novel areas and thus tend to produce richer data than structured interviews in particular (Briggs, 2017:100). Delamont (2012:129) shows the appropriateness of semi-structured interviews for this study by explaining that a researcher can develop an enhanced research relationship with participants through the use of in-depth, semi-structured interviews as conversations rather than through surveys or structured interviews (which are quantitative methods) that limit researcher/participant interactions.

Smith and Osborn (2007:2) assert that the ordering of questions in semi-structured interviews is less important and thus allows flexibility of questioning during the interview process. It means that the interviewer is free to probe interesting areas that arise during semi-structured interviews and thus allows the researcher to seek clarifications and detail. It was necessary in this study for the researcher to probe interesting areas in order to adequately answer research questions. Semi-structured interviews can follow the respondent’s interests or concerns (Pietkiewicz & Smith, 2014:8), which was key to this study because it allowed the researcher

to understand the perceptions, lived experiences and meanings of participants about teenage pregnancy.

The use of open-ended questions and probing questions associated with semi-structured interviews also give participants the opportunity to respond in their own words, rather than forcing them to choose from fixed responses. It was thus necessary for female adolescents to articulate their experiences and perceptions of teenage pregnancy in this study in their own words and with minimum interference from the researcher. Open-ended descriptions of experiences are clearly difficult to analyse or more difficult to draw generalisations from, but they may offer a greater insight into people's personal worlds. The use of open-ended questions have the ability to evoke responses that are meaningful and culturally salient to the participant, unanticipated by the researcher, rich and explanatory in nature (Smith & Osborn, 2007:2), hence they were appropriate for this research which focused on getting meaningful responses from female adolescents. Semi-structured interviews also use in-depth interviews which are optimal for collecting data on individuals' personal histories, perspectives and experiences particularly when sensitive topics are being explored, such as teenage pregnancy.

Semi-structured interviews were also appropriate for this research basically because they were in line with the exploratory design, qualitative approach and phenomenological paradigm adopted by the researcher to understand the female adolescents' experiences of teenage pregnancy, how they made sense of it and what meanings those experiences held (Smith, 2004:39-54). The researcher employed semi-structured interviews because the research focused on eliciting direct experiences, perceptions, feelings, beliefs, and convictions of female adolescents about teenage pregnancy, bracketed from social constructs, interpretations, theoretical concepts, ideologies, subjective judgments and the researcher's presuppositions (Mills & Birks, 2014:185; Smith, 2004:39-54).

Qualitative, semi-structured, open-ended interviews with some probing questions were thus used by the researcher focusing on the female adolescents' experiences and perceptions of teenage pregnancy (see Appendix M). The interview questions primarily focused on finding out the contributing factors and causes of teenage pregnancy, the consequences of teenage pregnancy and how female adolescents perceived their experiences of teenage pregnancy. For example, the researcher began the interviews by asking the participants to tell him about their experiences of falling pregnant as a teenager.

The researcher called for a preliminary meeting with the participants to discuss, *inter alia*, the logistical aspects of the study such as the purpose of the study, its significance, the importance of their participation, risks anticipated such as inconvenience of partaking in the study, ethical considerations such as their rights of privacy, consent forms for parents as well as consent forms from participants (over 18 years of age) and assent forms for those participants who were below 18. The researcher informed participants that their participation in the study was voluntary and that they were free to withdraw at any time without a reason. Times for interviews were scheduled. The participants were informed that the interviews would take approximately 45-60 minutes.

After emphasising his commitment to ethical measures that included, *inter alia*, confidentiality and anonymity of participants, the researcher informed participants that, with their consent, a voice recorder was to be used to record their responses. The interviews were held at three secondary schools in Belfast, Mpumalanga in South Africa. The interviews were conducted during afternoons after school to avoid interference by other learners and also to cater for privacy. The researcher used special rooms in the schools in order for the interviews to be carried out within participants' natural settings which promoted free participation of the participants.

An audit trail of events about the research was also kept by the researcher to promote credibility of research outcomes. Throughout all stages of data collection, the researcher kept a record of decisions he made and rationale for them. For example, the researcher made decisions on the days and times for the interviews at the three schools. The researcher also recorded the challenges he faced and the possible solutions he came up with.

Whilst the researcher applauded the use of semi-structured interviews in this study, especially because they allowed the researcher to get direct responses from participants, the researcher also took note of their limitations. Creswell (2014:242) cautions that the presence of the researcher in interviews can bias responses; hence it was important for the researcher to be as skilled as possible in conducting the interviews especially by establishing the trust of participants. The researcher also took into cognisance that, although there is a natural story telling urge and ability in all human beings (Jacob, 2012:10), not all participants are equally articulate and perceptive in their responses during interviews (Creswell, 2014:242), therefore it was important for the researcher to carefully craft the interview questions to allow participants to respond fully to all questions.

4.4.3 Data collection procedures

Creswell (2014:239) notes that it is important to gain access to research sites by seeking the approval of gatekeepers and individuals at the site who provide access to the site and allow or permit the research to be done. The researcher asked for permission to conduct the research from UNISA Ethics Review and Clearance Committee, the Mpumalanga Department of Education (Nkangala District), the Mpumalanga Department of Education (Emakhazeni Circuit), the Principals and School Governing Bodies (SGBs) of the three secondary schools, before asking for consent and assent from parents and participants respectively. The applications for permission included an explanation of the purpose of the research and its significance (see Appendices, B, C, D, E, F, G, H, I, J, K and L). The purpose of the study was to explore the female adolescents' experiences and perceptions of teenage pregnancy. The benefits of the study included heightening awareness of adolescents' experiences of teenage pregnancy, extending the knowledge base related to adolescents' perceptions of teenage pregnancy, supporting policy decision making as well as contributing to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

With permission from the principals of the three schools, the researcher presented his research to the general population of female adolescents in each of the schools. The researcher informed the female adolescents of the exact focus of the research, which was to explore the female adolescents' experiences and perceptions of teenage pregnancy and why the research could be of importance to all adolescent females. He explained the ethical considerations such as confidentiality and anonymity. The researcher informed the female adolescents that only self-volunteered participants would be selected and interviewed individually. The female adolescents who were willing to participate were asked to contact the researcher confidentially by completing a form with their contact details or by phoning the researcher with their details.

The researcher then purposefully selected 20 self-volunteered participants from the three secondary schools for the individual interviews in order to explore the phenomenon of teenage pregnancy in depth and also to take into account the importance of ethical measures in research. Creswell (2007:133) emphasises the importance of acquiring participants who are willing to openly and honestly share information. When participants willingly and honestly share information, it promotes the credibility of results.

The researcher called for a preliminary meeting with the participants of each school to further discuss the logistical aspects of the study such as the purpose of the study, its significance, the importance of their participation, ethical considerations, consent forms for parents and assent forms for the participants. After emphasising his commitment to ethical measures that included confidentiality and anonymity of participants, the researcher informed participants that, with their consent, a voice recorder was going to be used to record their responses. The participants were encouraged to ask clarity seeking questions to avoid any misunderstandings about the research. The researcher gave participants his contact details in case of any enquiries they might have.

The researcher contacted parents and guardians by phone to give consent for their children to take part in the study. Parents and guardians were also asked to sign consent forms which were given to them via their daughters (see Appendix L). The participants also gave consent and assent to take part in the study by also reading and signing the consent and assent forms (see Appendix J and Appendix K).

After the consent and assent forms were signed, the researcher prepared an interview schedule/protocol for the individual interviews (see Appendix M). Interview protocols, according to Jacob (2012:10), are not only a set of questions, but also a procedural guide for directing a qualitative researcher through the interview process. O'Hara et al. (2011:171) explain that even though an interview schedule contains a preliminary set of questions, a semi-structured interview schedule is structured but allows the flexibility of the researcher to add questions. In this regard, the researcher noted that even though he had constructed questions beforehand he could still follow up interesting themes and ideas by asking additional questions during the interview. The interview protocol included the following: a header containing spaces to record: the interviewer's name, date, and location of the interview; a questionnaire for background information of the interviewee; a script explaining the purpose of the study and below the header a list of preliminary questions to be addressed in the interviews with all participants (see Appendix M). Denzin and Lincoln (2005:124) note that interview protocols thus help to guide the collection of data in a systematic and focused manner; hence they were necessary for this study.

Knox (2009:566) suggests that before any interview can occur, consideration must be given to the very questions that will be asked. Denzin and Lincoln (2005:124) also emphasise that semi-structured interviews are typically planned carefully before the interviews are carried

out. The researcher thus took into consideration Creswell's (2014:185) suggestion that beginning research questions with 'what' or 'how' convey an open and emerging design which suits a qualitative approach, and the researcher found them to be appropriate for the study. The researcher constructed open-ended (broad and general) questions for participants to construct the meanings and perceptions of teenage pregnancy, under research in this study. The interview questions which were asked by the researcher focused on exploring the female adolescents' experiences of falling pregnant, how the world of a teenager influenced their sexual behaviour and their decisions about pregnancy, how teenage pregnancy affected them as teenagers as well as other people, and also their reflections on their shortcomings about falling pregnant as a teenager. The questions were accompanied with possible prompts for clarity purposes and for the researcher to enhance understanding of the perceptions of teenage pregnancy.

The interviewer familiarised himself with the interview schedule so that the process of interviewing would appear more natural and less rehearsed (Denzin & Lincoln, 2005:124). When the interview schedule was ready, the researcher told participants about the dates of the interviews. The participants were informed that the interviews would take 45-60 minutes. Special rooms in the schools were identified for the interviews because, as noted by McNamara (2009:1), an interview setting should have very few distractions. Creswell (2007:133) also suggests conducting interviews with participants in a comfortable environment where the participants do not feel restricted or uncomfortable to share information. The researcher found the rooms to be spacious and comfortable for the individual interviews.

Partington (2001:32) posits that effective interviewing is a complex task requiring attendance to a range of skills. The researcher thus took into account the skills and techniques that were necessary for conducting the interviews, bearing in mind that the techniques would help the researcher to gain insight into the female adolescents' experiences and perceptions of teenage pregnancy. Jacob (2012:1) asserts that skilled interviewers can gain insight into lived experiences, learn the perspectives of individuals participating in a study and discover the nuances in stories. Partington (2001:2) asserts that there is definitely an art in the process of obtaining sound data through the interviews. The researcher thus took into cognisance that the goal of the research was to rely as much as possible on the participants' views of teenage pregnancy; hence it was paramount for the researcher to be as skillful and procedural as possible in data collection.

The first task of the researcher was to establish empathy and rapport, especially before every interview. Partington (2001:32) notes that the establishment of empathy and rapport can have a positive effect on the subsequent development of the interview particularly by encouraging participants to disclose information to the interviewers. It was necessary in this study for participants to have confidence in the researcher in order for the participants to disclose information to him. On the dates of interviews, the researcher talked to the participants individually about the importance of their participation, and reassured them of their safety, privacy and confidentiality throughout the whole research process. Talking to participants in a friendly manner was meant to boost their trust in the researcher thereby making them ready to divulge truthful information necessary for answering research questions.

The researcher complied with McNamara's (2009:1) recommendations to be cautious in the implementation stage of the interview process by making use of two recorders for every session. As recommended by McNamara (2009:1), the researcher always checked if the recorders were working properly, particularly before every interview session.

Audio-recorders, according to Creswell (2014:242), provide an opportunity for participants to directly share their reality but may be difficult to interpret. The researcher thus made sure that interview questions were clearly framed to allow participants to understand the requirements of each question. The researcher asked one question at a time to avoid confusing participants. The researcher remained as neutral as possible (for example not to show strong emotional reactions to the responses of participants) to motivate participants in the process of giving information.

Partington (2001:33) emphasises that it is important for the interviewer to listen to the responses and to demonstrate attention and interest so as to obtain quality data from participants. In this study the researcher carefully and attentively listened to the perceptions of participants about their experiences of teenage pregnancy in their specific contexts. The researcher encouraged the responses with occasional nods of the head (McNamara, 2009:1) and framed follow-up questions in the light of the responses for participants to clarify issues. Creswell (2014:244) posits that probes help to follow up and ask individuals to explain their ideas in more detail or to elaborate on what they have said, so it was necessary for the researcher to use probes as follow-up questions in this study.

The researcher also showed his attention to participants' responses by restating some of their responses. Partington (2001:44) advises that restating allows the interviewer to demonstrate

that he or she has listened to the answer, thereby encouraging participants to give more information necessary to address research questions. In the next section data analysis and presentation is discussed.

4.5 DATA ANALYSIS

“Not everything that can be counted counts and not everything that counts can be counted” (Albert Eistein (1879-1955) in O’Leary, 2005:173). The above assertion shows that some aspects that are of significance in research may not be easily quantifiable but require words to express their significance. Wertz et al. (2011:229) comment that “when Albert Eistein (1879-1955) recognised the limits of quantification in quantitative research, it is indeed a powerful endorsement for working with qualitative data because meanings can be both intricate and complex, making it difficult to reduce them to numbers”. In this regard, there was a need in this research to employ qualitative data collection and analysis procedures in order to capture the female adolescents’ experiences and perceptions of teenage pregnancy that could not be quantified thereby safeguarding the loss of richness of the data.

Data analysis can be viewed as a process of inspecting, cleaning, transforming and modelling data with the goal of discovering useful information, suggesting conclusions and also supporting decision making by the researcher (Creswell, 2007:148; Turner, 2010:754). Mills and Birks (2014:189) explain that data analysis is a crucial step in the research process and for the phenomenological researcher represents the stage in the research process in which the essential nature, the essence of the phenomenon of interest may be understood and represented. The goal of qualitative research is to gain insight, explore the depth, richness and complexity inherent in the phenomenon (Cooper, Fleischer & Cotton, 2012:7); therefore, the need for systematic data analysis procedures in this study could not be overemphasised.

The aim of this study was to understand the ‘what’ of the experience of teenage pregnancy (phenomenology) and ‘how’ the female adolescents made sense of their experiences (interpretation) (Fade, 2004:647; Griffith, 2009:1). In other words, the phenomenological approach employed in this study aimed at giving evidence of the participants’ making sense of the phenomena under investigation and at the same time documented the researcher’s sense making (Pietkiewicz & Smith, 2014:8) through a systematic data analysis process.

All interviews were audio-recorded. Stuckey (2014:6) posits that with a recording the interviewer can concentrate on listening and responding to the participant without being

distracted by writing extensive notes. Although the researcher noted the non-verbal cues, body language and facial expressions during the interviews, audio-recording helped him to concentrate on listening and probing. After the collection of data, the researcher made sure he was thoroughly familiar with the data before transcription by listening to the audio-recorded interviews. Thereafter, the researcher embarked on the process of data transcription. Audio-recorded individual interviews were transcribed into written form for closer study by the researcher (Bailey, 2008:127). The researcher took into consideration Bailey's (2008:128) assertion that the transcription process is an interpretive process because it involves judgments about what level of detail to choose. Stuckey (2014:8) cautions that the accuracy of the transcription plays a role in determining the accuracy of the data that are analysed. The researcher transcribed the data verbatim to minimise inaccuracy. A wide margin was left on the right hand side of each transcript for the researcher to note down important information from the transcripts.

The researcher took into consideration that literature on analysis of phenomenological data does not prescribe a single method for working with data, instead a set of common principles (i.e. moving from the particular to the shared and from descriptive to the interpretive) are applied flexibly (Palmer, Larkin, Devisser & Fadden, 2010:99). The researcher also took into cognisance Creswell's (2007:148) recommendations that data analysis in qualitative research consists of preparing and organising data for analysis, then reducing the data to themes through a process of coding and, finally, representing the data for discussion. After all data was transcribed, the researcher used Tesch's method of analysis for qualitative data (Tesch, 1990:142-145) to analyse the data collected through the phenomenological interviews with the female adolescents.

Step one

The researcher began by initial exploration of the data by reading through the whole of each transcript to review an entire recording to remind himself of the depth and breadth of its content and also in order to get a global sense of the whole. This involved reading, reflecting and connecting to capture the essential nature of what was spoken by the participants before breaking down the details within them. According to Creswell (2009:185), reading through all data helps the qualitative researcher obtain a general sense of the information of participants as well as to reflect on its overall meaning.

Step two

The researcher selected one interview transcript at a time. He read each interview to try to get the underlying meaning in the information and wrote down thoughts coming to mind in the right hand margin of the texts.

Step three

After going through the transcripts, the researcher began the coding process of the data. The researcher reread the interview transcripts to divide data into meaningful sections or units. This involved line by line analysis of the transcript to code the participant's experiences based on the research questions. Coding leads the researcher from data to the idea and from the idea to all the data pertaining to that idea. The researcher thus worked closely with data, annotating it closely (coding) for insights into each participant's experiences and perspectives of their life world. The researcher used the right hand margin of the transcript to annotate what was interesting and significant about what the respondent said. Associations or connections that came to mind and preliminary interpretations were also noted at this stage.

Step four

The researcher arranged the similar topics in groups by forming columns labelled major topics, unique topics, and leftovers on a separate sheet of paper.

Step five

The researcher went back to the data and abbreviated the topics as codes and wrote the codes next to the appropriate segments of the texts. The coding was done in respect of the research questions and sub-questions. The researcher then observed the organisation of data to check if new codes emerged.

Step six

The researcher catalogued the emerging codes and subsequently began to look for patterns in the codes. The researcher found the most descriptive wording for the codes to convert them into categories or themes. The researcher gave each theme a title that helped to establish the female adolescents' experiences and perceptions of teenage pregnancy. The right hand margin was used by the researcher to document emerging theme titles using a coloured pen. A theme is described by Smith et al. (2009:92) as a concise and pithy statement of what was important in the various comments attached to a piece of transcript. Themes are usually

expressed as phrases that contain a particularity to be grounded and enough abstraction to be conceptual (Bazeley, 2013:1-8).

Step seven

The themes that reflected detail were finally clustered and combined into superordinate themes that described the essential and more general aspects of the adolescent females' perceptions of teenage pregnancy. In other words, the researcher categorised the themes into much broader themes (major themes). The researcher at this stage engaged in interpretive coding whereby the researcher went beyond the interpretations and descriptions of participants to get the meanings and to sift lessons learned from the data (Creswell, 2009:185). The lessons were partly derived from the researcher's personal interpretation as well as the meanings derived from comparison of the findings with information from the literature review.

Step eight

The researcher abbreviated and alphabetised the major themes.

Step nine

The researcher summarised the final set of themes and placed them in a table where narrative evidence from the text was given to back up the themes. In other words, the researcher finally grouped the themes and sub-themes with supporting quotes from participants. The final set of themes was used in chapter five for reporting and further interpretation by the researcher (Fade, 2004:647-653; Bazeley, 2013:1-8). The results of the research were discussed with accompanying quotations from the data and supported by literature control to enhance the scientific trustworthiness of the study (Fade, 2004:647-653). Just like any other qualitative study, data presentation was done in narrative format.

4.6 ETHICAL CONSIDERATIONS

Goodwin (2008:44) notes that all research on human behaviour imposes some burden on those participating such as spending time in interviews when they could be doing something else. Stuckey (2014:7) contends that if the researcher is conducting interviews or obtaining data through an interaction with any living individual, a human protection review is often required. The researcher believed that adolescent female learners as participants in this study were also subject to the negative outcomes of the research process. In this regard the

researcher had to take into account the importance of conducting the research in an ethically responsible manner.

Ethics are a set of moral principles that aim to prevent researchers from harming those they researched, be it physically or psychologically (O'Hara, Carter, Dewis, Kay & Wainwright, 2011:114). Ethical considerations matter in any research because they promote the integrity and credibility of research as well as acting as safeguards for the researcher (O'Hara et al., 2011:109). Issues of ethics in this study thus focused on establishing safeguards that would protect the rights of participants and also prevent any form of harm by the researcher (Lodico et al., 2010:16; O'Hara et al., 2011:114).

4.6.1 Informed consent

Research subjects have the right to know that they are being researched, the right to be informed about the nature of the research and the right to withdraw at any time (Seale et al., 2004: 231). Goodwin (2008:48) points out that truly informed consent should never result in people being deceived about the purpose of the study. The researcher made sure that he did not engage in any form of deception regarding the aim and content of this research. The researcher took into account that female adolescents were minors who also needed the consent of their parents.

The researcher applied for permission to conduct the study from UNISA Ethics Review and Clearance Committee. As per the requirement of the UNISA Ethics Review and Clearance Committee, the researcher submitted a proposal of how the empirical study was going to be conducted, including the benefits of the research and ethical measures. The researcher also asked for permission from the Department of Education (Nkangala district), the Department of Education (Emakhazeni circuit), the principals of MP1, MP2 and MP3 secondary schools and the school governing bodies (SGBs) of the three schools (see Appendices B, C, D, E, F, G, H, and I). Letters were sent to parents outlining the purpose of the research, the procedures to be followed and what participation involved. An explanation of how the audio-taped interviews were going to be transcribed and used was done with each participant. The participants were also informed that their participation was voluntary and they had the right to withdraw from the study without repercussions. The information was meant so the parents and participants could make an informed decision before taking part in the research. The parents and participants signed consent and assent forms (See Appendices J, K and L).

4.6.2 Confidentiality and anonymity

According to Mertens (2010:342), confidentiality means that the privacy of individuals will be protected, and the data they provide will be handled and reported in such a way that they cannot be associated with them personally. Anonymity, as noted by Mertens (2010:342), means that no uniquely identifying information is attached to the data, implying that no one can trace the data back to the individual providing it. Goodwin (2008:59) asserts that research participants should be confident that their identities will not be known by anyone other than the researcher and that only group or disguised data will be reported. The researcher assured participants of his obligation to protect their identities to establish confidentiality and anonymity. The researcher informed participants that all personal identifying information would be removed from written transcripts and any quotes used within the research report would be treated with confidentiality by the use of pseudonyms. Participants were also informed that information would not be shared with their parents. All data was thus kept securely and confidentially at the researcher's home. The participants were informed that in the case that they withdrew from participation, arrangements would be made for the destruction of data in their presence.

4.6.3 Harm to respondents

The researcher informed participants that they would be protected from any harm during interviews including emotional, physical or psychological harm. The interviews were conducted at the three secondary schools during week days after school. The researcher was given special rooms in the schools to conduct the interviews. The rooms were suitable to conduct interviews because they provided non-threatening environments for participants and were free of distractions (Banyard & Grayson, 2008:458).

4.7 TRUSTWORTHINESS OF STUDY

Lincoln and Guba (1985:1) posit that trustworthiness of a study is important to evaluate its worthiness. Noble and Smith (2015:34-35) note that evaluating the quality of research is essential if findings are to be utilised in practice. The researcher believed that the findings in this study were no exception to the above; hence there was a need to take into account the trustworthiness of the research outcomes. Trustworthiness of qualitative research, according to Noble and Smith (2015:34), includes the soundness of the research in relation to the application and appropriateness of the methods undertaken and the integrity of the final conclusions. It also involves the integrity and application of the methods undertaken and the

precision in which the findings accurately reflect the data. To establish trustworthiness of this research, the researcher took into consideration the following aspects: credibility, trustworthiness, triangulation, member checking, transferability, dependability and confirmability of the research.

4.7.1 Credibility

As noted by Denzin and Lincoln (2005:169), credibility refers to whether the participants' perceptions of the settings or events match up with the researcher's portrayal in the research report. In other words, credibility pertains to the validation of findings and results (Seale et al., 2004:405), which in turn establishes confidence in the truth of the findings. To ensure credibility and to establish confidence in this study, the researcher had to take into account the following key attributes: member checks, triangulation and prolonged engagement. Prolonged engagement involves spending a reasonably lengthy time with participants to establish trust and good rapport. The researcher spent some time with participants as he visited schools prior to the interviews to establish their trust. Member checks and triangulation, which are discussed separately in the next sections, were also observed to promote the credibility of this study.

4.7.2 Trustworthiness

Seale et al. (2004:234) contend that trust refers to the relationship between the researcher and the participants and to the researcher's responsibility not to spoil the field for others in the sense that potential research subjects become reluctant to take part in research. Seale et al. (2004:66) explain that trust is the traditional magic key to building good field relationships in the production of credible knowledge. The researcher tried to establish his trustworthiness by talking to participants with honesty and openness. The researcher also avoided being judgmental and created an atmosphere free of intimidation during all the interviews.

4.7.3 Triangulation

Schostak (2002:78) explains that triangulation acts as a process of coordinating the attention of individuals to produce a shared reality and to provide a means of cross-checking the statements of an individual with those of another person. Triangulation is also established by the use of multiple data sources of data collection such as interviews, observations and reflection (Schostak, 2002:79). Whilst direct observation of the participants could not be ignored in this study, the researcher primarily used semi-structured interviews, literature

review and member checks as different sources of data collection so that comparisons and contrasts among them could be reflected upon. The researcher also cross-checked the statements of participants with those of other participants to assess similarities and differences in perception.

4.7.4 Member checks

Bazeley (2013:89) explains that member checking is a strategy for confirmation of findings as they are being developed, during or at the conclusion of the research. Member checks are also meant for triangulation of research findings. As part of member checks, the researcher constantly monitored his own subjective perspectives and biases by recording reflective field notes (see Denzin & Lincoln, 2005:169).

The researcher confirmed the findings of the study by checking the interpretations with participants (see Ezzy, 2002:74). The researcher sent summaries of findings to participants for review so that participants could authenticate the findings. In this process, participants were given the opportunity to correct errors and to assess the adequacy of the data (see Lincoln & Guba, 1985:2). In other words, the researcher tested the data and conclusions with some of the participants from whom data was originally obtained for member checking as well as for triangulation of the findings.

External audits of the data (checking the data) were also done primarily by the supervisor who examined the data collected, the transcriptions and the analysis that were carried out by the researcher. This was meant to ensure that the data collected corresponded with the analysis of findings.

4.7.5 Transferability

Denzin and Lincoln (2005:170) contend that transferability refers to the degree of similarity between the research site and other sites as judged by the reader of the research report. In other words, transferability involves showing that the findings have applicability in other contexts. Transferability was established in this research through thick descriptions of the findings as well as attempting to keep reasonably sufficient detail of the context within which the study occurred (see Denzin & Lincoln, 2005:170).

Prolonged engagement involves spending sufficient time in the field to learn or understand the culture, social setting or phenomenon of interest. Hence the prolonged engagement of the

researcher with participants in this study also promoted transferability because it meant that the researcher had detail of the contexts in which the participants were involved.

4.7.6 Dependability

Denzin and Lincoln (2005:170) assert that dependability parallels reliability in quantitative research. The purpose of establishing dependability is thus to evaluate the accuracy of findings as well as to assess whether or not the findings, interpretations and conclusions are supported by the data. To establish dependability of this research, the researcher took into account the importance of external audit and evidence of raw data by use of audio-tapes that could be referred to from time to time. External audits provide opportunities for other researchers to examine both the process and product of the research study. The researcher's supervisor was thus involved in examining whether the findings were supported by the data as already noted in member checks. The researcher also provided detailed explanations of how the data were collected and analysed so as to make it easier to evaluate the accuracy of the findings (see Denzin & Lincoln, 2005:171). In addition to the above, the researcher kept a record of the activities carried out throughout the research process in the form of an audit trail so as to provide evidence that the researcher evaluated the quality of his activities throughout the research process.

4.7.7 Confirmability

Mertens (2010:19) retorts that outcomes are rooted in contexts and persons apart from the researchers; hence the need to establish confirmability in qualitative research. Confirmability is whereby research findings show a degree of neutrality. Techniques for establishing confirmability include confirmability audit, audit trail and reflexivity. The confirmability audit is maintained when the study is shaped by the respondents and not researcher bias, motivations or interests (Mertens, 2010:19). Schram (2003:72) posits that the integral part of the phenomenological approach is to suspend judgments about what is real until they are founded on a more certain description of how everyday life is experienced. This study employed the interpretive phenomenological approach therefore the researcher bracketed his presuppositions until the stage of data analysis to allow the researcher's interpretive activity.

An audit trail is a transparent description of the research steps taken from the start of a research project to the development and report of findings. In this study, the researcher kept a

record of activities carried out by the researcher and participants especially from data collection to data analysis.

Reflexivity involves attending to the effect of the researcher at every step of the research process (see Lincoln & Guba, 1985:1). In this study the researcher maintained his neutrality throughout data collection and analysis in order to establish confirmability of the research study.

4.8 CONCLUSION

In this chapter discussions centred on strategies of inquiry that sought to understand the multiple meanings and perceptions of teenage pregnancy amongst adolescent female participants under study. The researcher used the exploratory design, qualitative research approach and phenomenological paradigm which he believed were appropriate for the empirical investigation. They were appropriate for this study primarily because they are closely aligned to the naturalistic assumptions that presume that reality is not fixed but is based on individual and subjective realities. In other words, they are based on the premise that people have multiple meanings of reality which may be influenced by the contexts in which they live. Researchers should therefore understand the complex world of lived experience from the point of view of those who live it. The researcher thus believed that the complex world of the lived experiences of teenage pregnancy could only be understood better from the point of view of female adolescents who live it.

The researcher found out that qualitative researchers should be actively involved with participants in order to understand participants' perspectives. Semi-structured in-depth interviews were applied as the main data collection method for this study because they allowed the researcher to be actively engaged with participants in order to explore their experiences and perceptions of teenage pregnancy in depth.

The data collection and analysis procedures discussed in this chapter are mainly in line with the qualitative research approach and the phenomenological paradigm employed in this study. Participants were purposefully selected on the basis that they were likely to supply in-depth information necessary to address the research question and sub-research questions. Tesch's (1990) guidelines for qualitative data analysis were used in this study.

Issues of research ethics, which focus on establishing safeguards that help protect the rights and safety of participants such as informed consent, confidentiality, anonymity and protection

from harm were found to be necessary for this study. Ethical considerations were discussed to also show the researcher's obligation to respect the rights, needs, values and desires of the participants in this study.

In order to come out with trustworthy results, the following aspects were found to be appropriate for the study: credibility, trustworthiness, member checks, triangulation, dependability, transferability and confirmability. On the whole, the researcher believed that the research design and methodology that was discussed would help to explore the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. In the next chapter, the focus will be on data analysis, interpretation and discussion.

CHAPTER FIVE

DATA ANALYSIS, INTERPRETATION AND DISCUSSION

5.1 INTRODUCTION

Teenage pregnancy has been a highly visible international social problem for the past several decades (Mollborn, 2007:92). It is a phenomenon that can affect teenagers as young as 10 years of age (Langham, 2015:1). Hence the economic and social costs of teenage pregnancy and child bearing have continued to be the major concerns of health and social care professionals the world over (McLeod, 2009:223). The need to address the social determinants and consequences of teenage parenthood cannot therefore be overemphasised.

The researcher conducted this study to explore female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The sub-research questions that delineated the focus of this study as stated in chapters 1 and 4 were as follows:

- (i) How do the developmental phases in adolescence influence teenage pregnancy?
- (ii) How does teenage pregnancy have an impact on adolescent development?
- (iii) What are the contributing factors and conditions that promote teenage pregnancy?
- (iv) What are the consequences of teenage pregnancy?
- (v) How do female adolescents perceive the experience of teenage pregnancy?

The sub-research questions were explored to bring the research question into context as well as to direct the course of the literature and empirical studies. The literature review in chapter two gave an overview of the influences of adolescent developmental phases on teenage pregnancy and the impact of teenage pregnancy on adolescent development at the micro level of the ecological systems. Chapter three explored the contributing factors and causes of teenage pregnancy mainly at the macro level of the ecological systems as well as the consequences of teenage pregnancy on the individual, family, community and world at large.

The literature study mostly included general information applicable to all cultural groups; however, the empirical research concentrated on the experiences and perceptions of African adolescents mostly from farm, rural and semi-urban environments. The researcher adopted an exploratory qualitative research design with a phenomenological research paradigm in order to gain an in-depth understanding of the African female adolescents' lived experiences and perceptions of the phenomenon of teenage pregnancy. The qualitative approach allowed the

researcher to collect data from the female adolescents within the natural settings of their schools.

In order to conduct the study, permission was granted by the Research Ethics Clearance Committee of UNISA (Reference number: 2016/08/17/46590633/18/MC), the Mpumalanga Department of Education (Nkangala District), the Mpumalanga Department of Education (Emakhazeni Circuit), the Principals and School Governing Bodies (SGBs) of the three secondary schools before asking for consent and assent from parents and participants respectively. The applications for permission included an explanation of the purpose of the research and its significance (see Appendices B, C, D, E, F, G, H, I, J, K and L).

The qualitative data were collected from 20 self-volunteered participants who were selected from three secondary schools for the individual interviews. In-depth semi-structured interviews were conducted with each of the 20 participants. In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity were strictly adhered to by the researcher. The participants were informed in writing that their participation was voluntary and that they were free to withdraw at any time without victimisation.

This chapter presents the key findings obtained from the in-depth interviews presented and discussed in relation to how they collaborate with existing theories in the literature study and to a new body of knowledge from the empirical research.

5.2 INFORMATION ABOUT PARTICIPANTS

Data were collected from 20 African female adolescent learners who experienced teenage pregnancy to full term with the knowledge of their parents/guardians and their respective schools. Ben-David (2011:145) explains that qualitative researchers seek not only to identify behaviour but to understand the meaning of the participants' behaviour in an in-depth manner; hence it was important to select a small sample to allow their perceptions to be explored in depth. Qualitative, semi-structured, open-ended interviews with some probing questions were thus used by the researcher focusing on the female adolescents' experiences and perceptions of teenage pregnancy (see Appendix M). The researcher then drew meanings from the transcriptions of interviews with the participants.

In order to conceal the identities of the schools and participants as well as to observe ethical measures, schools were coded and pseudonyms of participants were used. The school codes and pseudonyms are shown on tables 5.1 and 5.2 respectively.

Table 5.1 School codes

| School number | School code | Description of the school environment |
|---------------|-------------|---|
| 1 | MP1 | Learners mainly from semi-urban settings like townships |
| 2 | MP2 | Learners from farm, rural and semi-urban settings |
| 3 | MP3 | Learners from farm, rural and semi-urban settings |

Table 5.2 Biographical information of participants

| Pseudonym | Current grade | Grade when she fell pregnant | Age when she fell pregnant | Accommodation Arrangements |
|----------------|---------------|------------------------------|----------------------------|-----------------------------------|
| Nobuhle | 10 | 8 | 15 | Stays with mother |
| Gugu | 10 | 9 | 17 | Stays with mother |
| Thulisile | 10 | 8 | 16 | Stays with mother |
| Thando | 10 | 9 | 16 | Stays with mother |
| Pretty | 10 | 6 | 14 | Stays with mother |
| Apiwe | 11 | 10 | 17 | Stays with mother |
| Lebo | 11 | 10 | 17 | Stays with mother |
| Nicole | 11 | 10 | 17 | Stays with other relative |
| Harmony | 11 | 10 | 15 | Stays with mother |
| Nqobile | 11 | 8 | 15 | Stays with mother |
| Busi | 11 | 9 | 18 | Stays with both mother and father |
| Gloria | 12 | 11 | 17 | Stays with mother |
| Mpunza | 12 | 10 | 17 | Stays with grandmother |
| Nomasonto | 12 | 8 | 14 | Stays with both mother and father |
| Precious | 12 | 11 | 19 | Stays with both mother and father |
| Intelligence | 12 | 10 | 16 | Stays with mother |
| Makhula | 12 | 12 | 17 | Stays with other relative |
| NXoliswa | 12 | 10 | 15 | Stays with other relative |
| Angel | 12 | 10 | 17 | Stays with both mother and father |
| Rethidisitshwe | 12 | 10 | 16 | Stays with both mother and father |

5.3 FINDINGS AND DISCUSSION

This section focuses on analysing, interpreting, and discussing data reflecting the female adolescents' perspectives on their lived experiences of teenage pregnancy. Qualitative research is first and foremost inductive (Zeek, 2012:34) which means that the data comes from real life observations or questions in order to understand the phenomenon. In this

qualitative study, data analysis was performed inductively to allow the researcher to build knowledge from interviews with the female adolescent participants.

The researcher audio-recorded all interviews. After conducting the interviews, the researcher embarked on the process of data transcription. After all data were transcribed, the researcher used Tesch's method of analysis for qualitative data (Tesch, 1990:142-145). The researcher conducted a thematic analysis of the interview transcripts. The researcher organised the data into categories, themes and sub-themes which emerged from observations and interviews of the participants. In other words, the themes that shared common meanings were grouped into categories. The emerging themes and sub-themes helped the researcher to understand the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The categories and themes are tabulated in Table 5.3 below:

Table 5.3 Categories and themes

| Categories | Themes |
|---|--|
| 1. Adolescent developmental influences | Changes in sexual interests, social developmental dynamics, Psycho-emotional experiences, thinking patterns and moral judgments, Pregnancy prevention and contraceptive practices. |
| 2. Effects on the life world of adolescents | Health and physical wellbeing, social life, psycho-emotional wellbeing, educational implications, post-pregnancy sexual behaviours. |
| 3. Contributing factors | Socio-cultural influences, change in community lifestyles, socioeconomic factors, technology and social media. |
| 4. Consequences | Individual, Family, Community |
| 5. Post-pregnancy reflections | Life time lessons, future outlooks |

The above categories and themes have been used by the researcher to present and discuss findings in the ensuing paragraphs, supported by direct quotes from the participants. Similarities and differences between literature and empirical study have been highlighted to confirm or refute the findings.

5.3.1 Category 1: Adolescent Developmental Influences

Adolescence is a dynamic developmental process, roughly spanning the years from the onset of the pubertal process to maturity, during which young people come to terms with themselves and with their unique place in the environment (Herzog et al., 2007:68;

Trommsdorf & Chen, 2012:6). It is a transitional stage during which young people navigate the stormiest years in their development (Owens, 2002:492; Akella & Jordan, 2015:41).

The participants' narratives in this study showed that the developmental phases of adolescence were in part responsible for influencing their perceptions of teenage pregnancy and also clouded their judgments in sexual decision making. Guided by the participants' responses, the researcher devised the above category of adolescent developmental influences under which the following themes emerged: changes in sexual interests, social developmental dynamics, psycho-emotional experiences, thinking patterns and sexual decision making as well as pregnancy prevention and contraceptive practices.

5.3.1.1 Theme 1 Changes in sexual interests

As the participants recounted their teenage pregnancy experiences, particularly their sexual behaviours before pregnancy, it was evident that all the participants developed heightened interests in people of the opposite sex. This is however a natural phase which all adolescents go through. The participants openly showed their determination to get the attention of boys at school. When asked to elaborate on her interests with boys, Angel said:

Yah at home, I was no longer going on time. I would keep sometime to go and see my boyfriend. I used to bath every day whenever my boyfriend called. I would take a bath, make my face and go.

Apiwe also showed her determination to get the attention of boys. She reported:

As of me, when I came to school I made sure that everything I do was up to tight, my uniform, so that everyone who looked at me would say 'Whao! That girl is smart.' That is how I attracted him.

Busi recounted that she was unhappy at first by the slow start of her relationship with her boyfriend:

I loved him before he loved me. When I started to see him here at school I was like saying to myself why is this boy not coming to me and ask me that he loves me?

Some of the participants showed their strong desires and determination to establish a sexual relationship by taking the first step to persuade their boyfriends to start sexual relationships. Intelligence revealed that when she was still at primary school level she kissed her 'would be boyfriend' first but then she apologised:

We were in Grade 7 chatting as friends about something else then I kissed him first then later I said it was a mistake. This is when he expressed his feelings and I expressed mine.

Intelligence also revealed that she could not wait to initiate sex and persuaded her boyfriend into their first sexual encounter:

One day I decided to use my mom's make up to attract him. Then I called him to tell him I was coming. When we talked and talked I started tightening to see if he will say no. I started to do those things girls told me to do to a boyfriend. That day I came back home very late like 12 midnight. That's how I started to have sexual intercourse.

The behaviour of the above participants is consistent with literature findings that as adolescents go through the transition stage of childhood to adulthood they experience a heightened desire for people of the opposite sex. The onset of physical changes that results in puberty marks the beginning of the adolescent period (McDevitt & Ormrod, 2010:162; Rice, 1992:118). The physiological changes of puberty can influence the way adolescents relate with other people and may also affect their self-perceptions (Rutherford, 2011:398). Woolfolk (2010:78) explains that it is during adolescence that sexual feelings increase in intensity, reflecting the greater amount of sex hormones circulating the body of both females and males.

The participants in this study openly showed their heightened desires for boyfriends and their inability to exercise restraint by embracing the dramatic changes of puberty in ways they saw appropriate. It is evident therefore that during adolescence the lives of males and females often involve sexual acts due to heightened sexual urges and desires (Zembar & Blume, 2009:129; Kail & Cavanaugh, 2007:311; Santrock, 2008:186).

The researcher also noted tremendous freedom of the participants in sexual expression and initiation of sex, contrary to traditional beliefs that accord sexual initiation exclusively to the male gender. This is a manifestation of societal transformation particularly in gender stereotypes involving male/female sexual relationships.

5.3.1.2 Theme 2 Psycho-emotional experiences

Arnett (2013:158) indicated that adolescents report more extremes of emotions than pre-adolescents or adults probably because of rapid developmental changes associated with puberty. It implies that most adolescents are prone to psycho-emotional instability instigated by pubertal changes. In this study many participants reported that they experienced hostile home environments that negatively affected their psycho-emotional wellbeing. They would often behave in an inappropriate way because of emotional turmoil.

The primary caregivers, who included mothers, grandmothers, foster parents and fathers, were mostly responsible for causing the participants' psycho-emotional instability. Mpunza (crying almost throughout the interview) talked of her abusive experiences at home and said:

It was very tough sir because I lived with my grandmother and aunt because my mother died when she gave birth to me. Then my grandmother abused me. She always beat me and did silly things to me. So then I decided to go and stay with my boyfriend.

The researcher asked Mpunza to elaborate on the abuse from her grandmother. Mpunza had only this to say:

I do not know sir because sometimes she said it was better if it was me who died not her daughter.

Busi's mother was mainly abusive under the influence of alcohol. When asked to elaborate on the behaviour of her drinking mother, Busi said:

When she is drinking she likes to shout at us at home, me and my sisters. Sometimes kicking us out of the house. When something is missing at home she always blamed us.

Another participant, Nxoliswa, experienced a negligent mother and abusive foster parents. She was abandoned by her mother when she was three years of age. Then from three years to nine years she stayed with hostile foster parents before she was transferred to a children's home. When the researcher asked Nxoliswa to elaborate on her life with the foster parents, she could not hide her negative emotions in her response:

The foster parents were not very nice. They accused me of stealing, swearing and everything. They never showed me love. They always criticised and never encouraged me. Whenever I wanted something they first complained and they reminded me every moment where I came from.

When the researcher probed the above participants to elaborate on how they started their sexual relationships, their responses showed that, because of their need for acceptance and love which they failed to get at home, they irrationally put themselves in the hands of their boyfriends. Busi did not feel loved and accepted at home so she looked for love elsewhere:

The boy came to sit with me and asked me to love him and I told him I would answer him tomorrow. When I was at home I started to think about my family issues. I started to wonder that this boy would give me that which I did not get at home, love.

Pretty, who had also experienced an abusive mother, indicated that she could not stay at home where she lacked love, so she went out with friends:

I needed someone who would love me. So I decided to stay outside the yard with my friends, something like that, doing things that I did not like for myself.

Nxoliswa also explained how she succumbed to the sweet words of her 25-year-old boyfriend:

He used to say all those things I wanted to hear because I never got all the love I wanted. I never got anything from anyone, so everything he said I fell for it. Whenever he called me, he said all those sweet words and I would jump and be happy. It looks like he blindfolded me with everything that he said and I just fell in love with him.

The sentiments of the above participants were a confirmation that emotional volatility or instability of female adolescents could cloud their judgments of potential consequences associated with adolescent sexual acts because of their need for love and acceptance. The behaviour of the participants above was consistent with Domenico and Jones' (2007:6) findings that parental rejection or a lack of warmth, affection or love causes adolescents to seek relationships outside the family to enhance their self-esteem. Thobejane's (2015:274) findings reveal that when the family is dysfunctional, as indicated by the participants above, there normally is little or no love offered to the children. As a result, Thobejane (2015:274) explains that the affected youth tend to seek love and affection elsewhere. The above participants therefore were trying to get affection and love outside their homes thereby falling prey to their boyfriends' conditional love that demanded sexual intercourse. The love and acceptance offered by the boyfriends thus clouded the participants' judgments of the potential risks of pregnancy. They ran from home only to get deeper problems associated with teenage pregnancy.

Many participants' responses indicated that the primary caregivers at home, including foster care parents, were responsible for creating hostile home environments thereby forcing them to seek love and acceptance outside of their home contexts. Adolescents affected by hostile home environments may try to attain a sense of self-worth by getting involved in sexual relationships at an early age because this is where they feel loved (Thobejane, 2015:275).

5.3.1.3 Theme 3 Social developmental dynamics

Bronfenbrenner (1979:3) acknowledges that microsystems are very influential in adolescents' social development because they include the settings within which the adolescents directly interact, like the family, peers and the school contexts. If there are instances of inadequate communication in these settings, adolescents find it difficult to come up with sound judgments or decision making regarding sexual matters. From the responses of participants, three sub-themes emerged, namely, family settings, peer influences and school settings.

Sub-theme 1 Family settings

Bronfenbrenner's (1979:3) bioecological theory postulates that adolescents grow up in specific families with certain belief and value systems; hence the family is the most natural unit helping to shape important personal decisions such as sexual decision making (McDevitt & Ormrod, 2010:68; Rathus, 2006:446; Bronfenbrenner & Morris, 1998:997). Meece and Daniels (2008:446) also posit that the family is the child's primary source of support and nurture in early development; therefore, it is quite powerful in influencing adolescent behaviour. The above assertions imply that dysfunctional families can have negative influences on adolescents' behaviours.

Research has shown that monitoring is less vigilant and discipline more permissive in single parent than in two parent households (Meece & Daniels, 2008:455). Literature (e.g. Adams, 2000:23; Trommsdorff & Chen, 2012:6) also indicates that the absence of a father in particular is an important factor in teenage girls becoming pregnant. In other words, two parents are better than one parent because they can share family responsibilities.

The majority of participants in this study revealed that they were raised in single parent households where the mothers or grandmothers were the primary caregivers. In other words, the majority of the participants were raised in the absence of their fathers with the result that they lacked co-parental supervision. The single parent set-ups in which the participants were brought up most probably affected their social development to such an extent that they indulged in early sexual activities due to inadequate supervision and control. The responses of the participants indicated that they were mostly raised in single parent households with the absence of fathers. Thando reported:

I was staying with my mother. We were not staying with my father.

Another participant, Mpunza, lost her mother after giving birth to her so she stayed with an abusive grandmother because the father was irresponsible:

My father is not responsible sir. He does not care about me. Sometimes my grandmother said I would rather go to my father yet she knew my father was staying with many women. He was dating many women.

Mpunza decided to leave her grandmother to go and stay with a boyfriend, thinking that she would be loved and accepted, but this resulted in her unwanted pregnancy.

Domenico and Jones' (2007:6) research revealed that parental influence was found to be a most significant variable in adolescent pregnancy prevention. According to Domenico and

Jones' (2007:6) research, adolescents whose parents communicated strong disapproval of sexual activity exhibited fewer risk-taking behaviours and were likely to delay sexual activities until a later age. However, in this study there was evidence of inadequate parental control and irresponsible primary caregivers, including foster parents, hence participants indulged in risk-taking behaviours such as early sexual acts. The responses of participants confirmed inadequate parental control and advice as well as irresponsible primary caregiving. The researcher probed Pretty, asking: "*How was your life before you fell pregnant?*" Pretty reported:

I did not have anyone to talk to me about many things that I did not know in life. My mother was always drinking.

Precious, who also believed that she was not properly guided, indicated:

No people advised me about things like that.

Some of the participants revealed that there was no strong disapproval of sexual activity in their families. In other words, some primary caregivers did not take decisive action to stop adolescent sexual activities. The researcher was surprised when Thulisile revealed that she had received permission from her mother to go and see her boyfriend without inquiring about their whereabouts or giving guidance about relationships. The researcher asked: "*Where did you meet this boy?*" Thulisile replied:

At my boyfriend's home.

The researcher then asked if she had told her mother and Thulisile responded:

I told my mother I was going to see my boyfriend.

The mother allowed her to visit her boyfriend whenever she wanted.

Most parents did not advise their children about the consequences of indulging in sexual acts but just told their daughters to visit the clinic for contraceptives and yet most of the participants were scared to go to the clinic. Participants did not use contraceptives consistently even though they were sexually active. Letliswe, like many other participants, was advised by her parents to visit the clinic when she started to be sexually active:

My parents told me that, 'If you think you are ready to sleep with a boyfriend you better go to the clinic before you fall pregnant.' The time I went to the clinic it was too late, I was already pregnant.

Thobejane's (2015:273) findings that a lack of parental support and monitoring is often related to adolescent substance abuse, criminal activities, as well as engagement in sexual activities at an early age, are in line with the above findings. The researcher concluded that

inadequate family communication, care, control, advice, guidance and monitoring were mainly responsible for teenage pregnancies. The participants were given too much freedom, especially in their single-parent households, leading to the exploration of sexual activities that resulted in unwanted pregnancies.

Sub-theme 2 Peer influences

Apart from home circumstances and relations with parents and caregivers, peer pressure seemed to be a major factor influencing participants to explore sexual activities. The following respondents indicated that their friends directly sensitised them to start sexual relations. Letliswe's friends coerced her into indulging in sexual activities. She indicated the peer pressure by saying:

Some of my friends that we grew up together with, they always said that, 'Why are you not sleeping with boys?' I said to them, 'Because I am not ready.' They said, 'Ah! You are out of fashion.'

Intelligence's friends were ignoring her because she did not have sexual relations like them. She reported:

One day I asked my friends, 'Why are you sidelining me?' They said, 'We are not sidelining you; you are not in our league, so how can we speak to a child?' Then I said, 'I am not a child.' They said, 'You are because you are not doing the stuff that we are doing.' Then I said, 'What stuff?' Then the other one started to tell me, 'Having sex.'

Pretty was also persuaded by friends to go out to taverns against her wish:

We went grooving, going to the tavern, which was the only thing I did not like. I was just doing it because my friends were doing it.

Besides direct pressure from their peers to indulge in sexual acts, there was also evidence of imitation or modelling of sexual behaviours. The researcher probed participants to find out if they shared their sexual experiences with friends. Nicole, like many other participants, revealed that they indeed shared their sexual experiences with each other:

Yah, because one of my friends fell pregnant before me. She used to tell me about her boyfriend. She told me the good times with her boyfriend.

The researcher concluded that as participants shared their sexual experiences with their peers, it influenced the majority of the participants to imitate or model their behaviours.

The majority of the participants also reported that they preferred to listen to their peers rather than parents because parents were not part of them and did not understand their interests.

Nxoliswa, like the majority of the participants, explained why she preferred to listen to friends:

You cannot listen to all teachers and parents obviously because you want to listen to your group. You choose friends because you think they are right and they understand much better about what you are going through.

Many participants also showed that they liked moving away from the confines of the family in order to conform to peers. In other words, the respondents showed that they needed their independence from parents to avoid parental restrictions. The researcher asked how their lives were before falling pregnant. Angel, like many other participants, revealed that:

Before I fell pregnant I was an outgoing person. I was partying so much. I liked friends.

The power of peers in this study was consistent with Sigelman and Rider's (2012:58) findings that "the intensity of involvement with a peer group gives way to more intimate friendships and romances which may culminate in sexual acts that can result in early pregnancy". According to literature findings, adolescents' social systems include conformity to the peer group, often contrary to the values of their parents, and also that adolescence is marked by more sensitisation to gender identity and roles (Rice, 1992:321; Arnett, 2013:3). The researcher concluded that peer influence and inadequate relations with parents influenced many participants to indulge in adolescent sexual acts, hence they fell pregnant.

Sub-theme 3 School settings

According to Bronfenbrenner's (1979:3) bioecological theory, adolescents are part of a community with its customs and traditions; they attend specific schools, play sports in teams, and belong to recreational clubs. All these contexts play a role in the social development of the adolescent, including their sexual behaviours (Woolfolk, 2010:19; Ben-David, 2011:100; Matlala, 2011: 89). Meece and Daniels (2008: 8) posit that by the time young people graduate from high school they will have spent more than 10 000 hours in school, thus school interactions are quite influential in the social development of adolescents.

Apart from the family settings discussed above, the empirical study revealed that school interactions played a pivotal role in shaping participants' sexual values, beliefs and attitudes. The peer influences that have already been discussed were mostly taking place in school settings because that is where the participants spent most of their time interacting with their peers. The study also revealed that 19 of the 20 participants who took part in this study were impregnated by school-going boyfriends. Only one participant, Nxoliswa, at 15 years of age,

fell in love with a 25-year-old working man. It meant that many sexually related matters, such as peer sexual influences, happened in school settings.

The participants in this study reported that they initiated their sexual relationships mostly at school. Just like 18 of the other 19 participants, Harmony indicated that she met her boyfriend at school. When the researcher asked Harmony what her boyfriend was doing she said:

He was at school. He was in Grade 10 and I was doing Grade 9.

Nomasonto started her relationship with her boyfriend when they went to the Grade 7 farewell:

It was in Grade 7 the time we were going to farewell then we fell into a relationship.

Nqobile's daring friend locked her in classroom with a potential boyfriend to force her to say yes:

One day my friend locked us in class. The boyfriend had faith that I should tell him that I love him. Then I said I love him too, so that the teacher would not see the two of us in the classroom. My friend and the boyfriend had arranged that before. He was also doing Grade 7 like me.

Nqobile was persuaded by a friend at school, just like the majority of the participants, to enter into a relationship. She said:

I was still young and did not want to have a boyfriend. So because of a friend Eish! I was doing Grade 7 and I was having a friend, so that friend had a boyfriend and also wanted me to have a boyfriend. I was refusing but in November I decided to have a boyfriend in class.

The participants revealed that most of the observations, imitations and modelling of sexual behaviours happened in their school settings. Nicole was observing her friend getting monetary assistance from her boyfriend at school and she also fell for it by saying:

If she is hungry at school she would call her boyfriend for help so I felt left out.

Nobuhle revealed that she observed many schoolgirls getting child support grant money and it looked lucrative:

Someone has three children at school and with three children they get more than a thousand rands.

Some of the participants indicated that having a baby was becoming fashionable. Nqobile, as she was giving advice to other girls, said:

To have a baby is painful but other girls think it is fashion. It is like a competition out there to have babies.

The empirical evidence above supported the theoretical framework of Bandura's (1977:46) social learning theory where individuals learn new behaviours by observing or watching others in a social situation, absorbing it and then imitating that behaviour. According to Akella and Jordan's (2015:41) findings, "the individual's immediate social circle generates behavioural models, which become a source of imitating behaviour". The social groups such as peers in schools communicate attitudes, views and values about sexual matters which adolescents can adopt and inculcate (Akella & Jordan, 2015:41). The researcher came to the conclusion that the social groups, that mostly comprised the participants' friends and school mates, promoted the communication of sexual values and attitudes which were adopted by the participants. The researcher also concluded that, although school settings were important nurturing spaces for young people, there were also negative sexual influences that young people experienced on a day to day basis.

5.3.1.4 Theme 4 Thinking patterns and moral judgments

Sub-theme 1 Thinking patterns

The participants in this study showed cognitive immaturity in decision making concerning their sexual acts, hence they fell pregnant. The responses of the participants showed that they did not think deeply about the consequences of their sexual acts. The majority of the participants in this study did not make a conscious decision to fall pregnant, thus pregnancy came as a surprise. The responses of the participants below show that they lacked foresight of the impending risks of pregnancy. The researcher asked participants: *Let us talk about your pregnancy. How did it happen that you fell pregnant?*

Makhula reported:

It just happened. When I went to the clinic they told me that I was pregnant.

Nobuhle indicated that she did not foresee pregnancy:

I did not decide to fall pregnant. It was just an accident.

Nicole also indicated:

It just came by itself.

Pretty felt that she did not think properly about her sexual activities:

It just happened because I did not even plan it. I did not even know what was happening because I was still a child. So I did not even make a decision, I was not thinking well.

The participants' lack of consciousness about pregnancy was consistent with Sigelman and Rider's (2012:40) revelations that cognitive limitations, failure to anticipate consequences, and lack of knowledge may all be factors that influence sexual decision making amongst adolescent females. Literature findings (e.g. Vincent, 2012:19; Stapleton, 2010:16) also show that adolescent girls fall pregnant because they may not be adequately equipped with physiological and psychological facts to grasp the meaning of their own sexual acts and the repercussions for themselves and others.

Some of the participants showed that they did not have enough power to say no to the demands of the boyfriends. Apiwe succumbed to the demands of her boyfriend, according to her feedback:

I did not want to fall pregnant but he said, 'People who love each other must have sex. Let us try.' I was scared but he told me not to be scared, then we tried.

Busi also reported her unwillingness to engage in sexual intercourse, but her boyfriend played with her emotions:

I did not plan it. The first time I had sex it was like painful. I did not like to, but I had no choice because he said I love him and people who love each other have to commit to each other.

Nxoliswa believed that, at 15 years of age, her immaturity caused her to believe her 25-year-old boyfriend's lies:

I fell to his lies because everything he said I believed because he was almost ten years older than me.

The responses of the participants above were in accordance with Slavin's (2009:35) findings that cognitive skills, such as decision making skills and interpersonal assertiveness skills, are still lacking for many adolescents. For example, the skill to say 'no' under peer pressure was found to be lacking amongst many female adolescents. The above participants' responses indicated that they succumbed to the pressure of their boyfriends thinking that by giving in to the boyfriends' demands their relationships would continue.

There were also signs of misconceptions, irrationality and a sense of invulnerability (egocentrism) amongst the participants. The researcher asked them to talk about their thoughts about sexual intercourse and pregnancy. The participants showed their immaturity in sexual decision making. For instance, Nomasonto indicated that she thought she was too young to fall pregnant. When the researcher asked about protection, Nomasonto showed her ignorance by saying:

Yah maybe condoms. But I was not aware if he was using condoms or not?

One of the participants, Makhula, openly indicated that she never thought of using contraception. She said she did not use protection because she thought she would never fall pregnant.

Busi revealed her sense of invulnerability and lack of foresight of the risk of pregnancy:

I did not think that I would fall pregnant that easily. I thought that I was having fun, not that I wanted a baby.

Thando also felt invulnerable when it came to pregnancy and said:

No I never thought I would fall pregnant.

The responses were in line with Kail and Cavanaugh's (2007:279) findings that adolescents' beliefs in their uniqueness contribute to illusions of invulnerability, the belief that misfortune only happens to others. Also, because of egocentrism, adolescents may think that they can have sex without becoming pregnant - like driving recklessly without being involved in an accident (McDevitt & Ormrod, 2010:451).

Some of the participants did not believe in parental advice. Gloria responded to the question of parental guidance:

But my parents always told me about pregnancy but I thought they were lying. After I fell pregnant I then realised they were telling the truth.

This was consistent with literature findings that adolescents may still be in the concrete stage of thinking or may still be living in the here and now; hence they are actually unable to plan far into the future (Vincent, 2012:19; Stapleton, 2010:16). Santrock (2008:46) explains that adolescents are not fully-fledged formal operational thinkers and as a result they may not be able to see far in the future like, for instance, being able to verbalise the real consequences of their sexual behaviour.

Misconceptions about sexual matters also emerged in this study. The misconception about virginity was revealed by Nqobile. Nqobile was persuaded by a friend whilst she was doing Grade 7 to experiment with sex. She was 15 years of age at the time and she explained her decision to have sexual relations as follows:

She (my friend) was saying, 'You are not supposed to be a virgin until you become 18.' She was saying, 'If you are a virgin until 18, if they break you, you will feel very painful. So it's easy to break your virginity now whilst you are still young.'

The researcher came to the conclusion that adolescents might not yet be mature enough cognitively to see the consequences of unsafe sexual practices (see Wood, 2012:2) and they did not have adequate information.

Sub-theme 2 Moral judgments

As the participants recounted their experiences of teenage pregnancy, they revealed their shortcomings in moral decision making involving their sexual choices. Moral development involves the formation of a system of values on which to base decisions concerning right or wrong, to use this knowledge to arrive at appropriate decisions when faced with complicated choices, and to have the strength and independence to act in accordance with that decision despite the fact that it may not be a convenient thing to do (Choudhury et al., 2006:165; Owens, 2002:591).

The responses of participants in this study showed that the cognitive, emotional/psychological and social contexts discussed above were major factors influencing adolescent moral decision making. Dietrich (2010:1) explains that “as adolescents’ cognitive, emotional and social development continue to mature, their understanding of morality expands and their behaviours become closely aligned with their values and beliefs”. It implies that, if an adolescent experiences inhibiting social contexts such as dysfunctional family settings, adverse psycho-emotional circumstances such as staying with rejecting caregivers, as well as cognitive limitations, she may not be able to come up with sound moral judgments.

Emotional instability influenced some of the participants’ moral choices. Mpunza explained how her hostile home environment negatively influenced her moral decision making:

Then my grandmother abused me. She always beat me and did silly things to me. So then I decided to go and stay with my boyfriend.

Pretty, who also experienced an abusive mother, acted against her moral conscience by engaging in sexual acts:

I needed someone who would love me. So I decided to stay outside the yard with my friends, something like that, doing things that I did not like for myself.

Malti (2013:1) explains that “emotions shape the landscape of human beings’ social and moral lives”. What adolescents feel is likely to influence how they think about situations, including their sexual behaviour. The above responses showed that the emotional instability

of the adolescents influenced their moral decision making by sensitising them to indulge in early sexual activities that resulted in teenage pregnancies.

Cognitive limitations, discussed above, also emerged as one of the major factors that negatively influenced the participants' moral judgments involving their decisions about their sexual activities. Cognitive development, according to Arnett (2013:61), is a gradual process that extends to adulthood; hence many adolescents may face challenges or limitations in moral decision making, especially those decisions involving their sexual behaviour. The responses of participants showed the inadequacy of the participants' moral decision making caused by cognitive immaturity. Just like the majority of the participants, Busi thought she was doing the right thing by engaging in sexual acts to show her love when she reported:

I felt that I was doing the right thing. I thought I must show him my love because I loved him.

Precious also did not see anything wrong in her sexual acts. She said:

I was thinking I was doing the right thing. I thought everything I did was right.

Welton (2011:2) explains that adolescents are generally more impulsive than adults, implying that they can be erratic in their thinking and moral decision making. Adolescents are psychologically less mature than adults, and this immaturity impairs their judgments and decision making (Bednar & Fisher, 2003:607).

The social circumstances of the participants influenced their moral decision making, especially their peer relations. Apiwe indicated that she, just like many other participants, could not avoid wrongdoing, due to peer influence:

I told myself that many girls are really in love, why not me? Why not I try and see what makes them happy?

The participants' moral reasoning supported Kohlberg and Piaget's theories of moral development. Most adolescents operate on Kohlberg's conventional moral reasoning level where decision making is based on social norms or maintaining social order in respect of what is expected by others (Matlala, 2011:44). The participants indicated that their sexual decision making was influenced by the expectations of their peers. Erikson theorised that identity formation during adolescence is achieved by emotional disengagement from the family and a transfer of attachment to peers (Bednar & Fisher, 2003:607). Thus the empirical evidence above supported Erikson's view because the participants showed strong attachments to their peers, in some instances disregarding parental advice. Gyan (2013:58) asserts that

peer influence contributes greatly to teenagers' involvement in early sex. Many adolescents may thus base their moral decisions on what is expected by peers.

The responses of some of the participants showed that their values were no longer consistent with societal expectations regarding premarital adolescent sexual activities. The following responses, after probing about social gatherings, showed a high level of alcohol abuse and premarital sexual acts. Angel explained:

Drinking alcohol, go out with friends. Go to party, house party, where we would drink alcohol, come home in the morning the following day. My parents used to beat me but I did not see the reason they beat me, I would go back again.

It meant that Angel, just like many other participants, enjoyed the substance abuse and sexual acts and did not adhere to parental advice. Angel also revealed acts of prostitution, just like many other participants who visited taverns, thereby signifying a high level of sexual immorality or inappropriate sexual behaviours. Angel openly revealed how female adolescents exchanged sex for alcohol:

They (men) ask you, 'Can I buy you a beer?' And you say yes. After you have drunk it you pay back by having sex with the person.

The love of alcohol and subsequent engagements in sexual acts were also reported by Intelligent:

There was a party at home. We stole some of the booze at home. We were drunk, then we ran out of the house, me and my siblings. Then when we came back in the morning we said sorry we did not even see the time.

She indicated that she did not know whether she used a condom because she was very drunk.

The responses of the participants, above, were an indication that alcohol abuse was a key factor that instigated irrational moral decision making of adolescents. According to Choudhury et al. (2006:165), moral development involves the formation of a system of values on which to base decisions concerning right or wrong. Morality is the way people choose to live their lives according to their own set of guidelines or principles that govern their individual moral decisions (Dietrich, 2010:1; Oswalt, 2010:1). It appears as if adolescent drinking and premarital sexual activities are becoming acceptable in many societies. The empirical evidence above, of alcohol abuse by female adolescents, which resulted in unwanted pregnancies, supports Nandi, Burman, Das, Saha and Pal's (2014:671) findings that there is a correlation between teenage pregnancy and alcohol abuse. The researcher believes that it does not matter whether it is in developing or developed countries,

alcohol abuse by adolescents is correlated with irrational moral decision making such as unsafe sexual practices.

5.3.1.5 Theme 5 Pregnancy prevention and contraceptive practices

The responses of participants indicated that adolescents' misuse or lack of contraception was a major factor that was causing early teenage pregnancy. The social context and cognitive limitations discussed above contributed to adolescents' inconsistent contraception use or lack of prevention altogether but there were other factors that were consistently brought forward by participants that need to be highlighted. Some participants expressed fear of contraceptive use, for instance, Nxoliswa indicated that:

He (boyfriend) gave me the morning after pills for me to use. So when I heard the side effects, I heard that my hair would come loose, I would feel dizzy, diarrhoea and everything, so I got scared to drink them.

Intelligent also expressed fear of contraceptive side effects:

My mother told me to go to the clinic but I said, 'No, I do not want to engage myself into it because I do not know the side effects of the injection and contraceptives.'

When asked how she became pregnant, Thando reported that she stopped contraception for fear of cancer:

I was putting the implant and then my sister told me the implant has a cancer and then I went to the hospital and took out the implant.

Another reason cited by participants for not using contraceptives was that they were scared or hesitant to visit the clinics. The researcher asked participants for some of the reasons for not going to the clinic and Nxoliswa exposed the stigma attached to young girls' visits to clinics:

We are afraid of judgments from other people because they think when you go to the clinic it is always about HIV or pregnancy.

Thando was also concerned about lack of confidentiality at the clinics:

The clinics help us, but when you come in you see many people, they will be looking at you, and then you get scared.

The participants, below, revealed the unfriendly environments at some of the clinics as reasons for their failure to seek contraception at clinics. Nobuhle did not like to face service providers at the clinics because:

I did not like to go to the clinic because they would ask some questions.

Precious mistrusted the service providers at the clinics and reported:

Sometimes the people at the clinic do not treat girls properly. They think you are too young to indulge into sexual acts. They say you are jumping the gun.

Angel was also not sure of the treatment she would get from the nurses when she explained:

I was afraid of the nurses, they are so rude, you see. When it was time to go to the clinic I asked myself what the nurses will say to see such a young person coming to the clinic to prevent. So I asked myself so many questions then I decided I am not going there.

The responses of participants above were consistent with research findings (e.g. Kollar, 2000:54) that suggest that adolescents can have their own perceptions or assumptions about sexual health services which, in turn, can negatively affect their contraceptive practices. The primary reason that adolescents may hesitate or delay obtaining contraceptive services may be their concern about the lack of confidentiality from service providers (Pediatrics, 2007:1135). The responses were also in accordance with Kollar's (2000:54) explanation that the use of health services is in part an admission of being sexually active, hence it arouses fears. The fear of participants to visit the clinics for contraceptive services was in line with Plummer's (2012:85) findings that the unfriendly environments at the clinics in some communities where health service providers do not attend to female adolescents' contraceptive needs positively, make it difficult for female adolescents to access contraception.

Traditional means of contraception were revealed by Gloria when she said:

We used traditional means of protection.

Traditional contraception means not to use modern methods of contraception prescribed at clinics but other means such as herbs to prevent pregnancy. It could be that Gloria was scared to visit clinics; hence she preferred to use her own methods which proved ineffective in the end because she fell pregnant.

Some boyfriends were also responsible for discouraging participants to practice safe sex, as revealed by Nqobile:

He (my boyfriend) was saying, 'Why should we prevent? If you go and prevent I will see that you are preventing.' I did not know what he meant. He also said, 'If you prevent you will have a big backside. I do not like a girl with a big backside.' So I was confused.

So Nqobile succumbed to the boyfriend's pressure to ignore pregnancy prevention, thereby making her vulnerable to pregnancy.

The other reason cited by participants to delay contraception was virginity, as Mpunza reported:

I did not think of pregnancy because I was a virgin. He broke my virginity and I fell pregnant at the same time.

It implied that some girls engaged in sexual acts unprepared because they were virgins and yet pregnancy could still occur the first time one practised sexual acts. It meant that adolescents who were virgins could be caught in the heat of the moment and have sexual intercourse unprepared. Many participants in this study, just like Nqobile, revealed that they had their first sexual encounters unprepared for sex. It just happened.

Inconsistent contraception by both participants and boyfriends made some participants vulnerable to pregnancy. The researcher asked Nicole to explain what could have happened that she fell pregnant even though she was using contraceptives. Nicole, like many other participants, revealed that she was inconsistent in her use of contraception:

I was supposed to go to the clinic the following day but I did not.

The researcher also asked if the boy was using contraception and Nicole had this to say:

Yah, but not all the time.

It meant that the boyfriend, just like many other boyfriends, was also inconsistent in the use of contraception.

The responses of participants generally confirmed Biello et al.'s (2010:279) assertions that many female adolescents continue to face intimidating psychological, physical and social barriers that interfere with responsible contraceptive behaviour such as anti-contraception beliefs in some families and communities; hence they become vulnerable to teenage pregnancy. The empirical evidence above supported Odejimi and Bellingham-Young's (2016:12) findings that "underutilisation of healthcare services particularly sexual health services among female adolescents has been associated with high teenage pregnancy in Africa".

5.3.2 Category 2: Effects on the Life World of Adolescents

The participants reported experiencing various negative influences on their lives as adolescents. The above category featured prominently from the interviews as participants described their lived experiences of pregnancy and motherhood. The participants' responses indicated that when teenage pregnancy was superimposed on top of ongoing adolescent

developmental changes, adolescents were negatively affected in the process. The participants' conscious experiences emerged as they responded to two main questions: (a) Tell me about your experiences of falling pregnant as a teenager. (b) How did your pregnancy influence your life as a teenager? From the responses of participants, key themes emerged as follows: health and physical wellbeing, social life implications, psycho-emotional wellbeing, educational implications and post pregnancy sexual behaviours.

5.3.2.1 Theme 1 Health and physical wellbeing

Vincent (2012:3) posits that “among the primary goals of most obstetricians is the continued health of the mother before, during and after gestation, but pregnancy in the exceedingly young patient frequently fails to achieve this objective”. The participants' responses showed that they experienced ill health during pregnancy, which in turn impacted on their physical wellbeing. Apiwe indicated that she became sick:

My body started to change. I had a lot of sicknesses.

Thando, like many other participants, developed high blood pressure:

My feet, my hands were sore and my blood pressure short up. My life was not easy, yoh! it was bad. My body was not right. I was dizzy, almost fainting.

Letiliswe, like Thando, was hospitalised due to high blood pressure. She said:

I had high blood pressure (BP); my mother had to be absent from work and take me to hospital.

Angel highlighted normal pregnancy symptoms but since she was experiencing it for the first time it was unbearable for her:

I was experiencing nausea, vomiting; I was very sick.

The high chances of pre-term births that are associated with teenage pregnancies were revealed by Nqobile who gave birth to a premature baby. The premature baby was always sick, as indicated by Nqobile:

My baby was a premature, 7 months, and was too much sick.

The health implications of teenage pregnancy cited by participants above were in line with literature findings that adolescents experience more pregnancy related complications than adults. The high blood pressure indicated by the participants above could have been symptoms of pre-eclampsia, a disease that is associated with teenage pregnancies (Nandi et al., 2014:673). Complications mentioned in literature in teenage pregnancy include premature labour, low birth weight, increased neonatal mortality, iron deficiency anemia, toxemia,

prolonged labour, feropelvic disproportion, vaginal infection and vaginal lacerations, all of which interrupt normal physical development (Chen et al., 2007:368; Allen & Dowling, 1998:22). Bryant (2006:133) reports that neonatal death rates are three times higher among adolescent mothers than adult mothers, an indication that teenage pregnancies are more likely to lead to severe complications or neonatal deaths. However, severe complications could not be established in this study because the participants in this study were limited to those adolescents who gave birth after full term pregnancy only.

The majority of participants indicated that their pregnancies negatively affected their perceptions and attitudes about their own bodies. Hence teenage pregnancy affected the participants' body shapes as follows: Mpunza liked her beautiful body, but it no longer existed. She said:

My figure was not there sir. I was having this beautiful body, a model body. I was thinking of modelling one day. That beauty crumbled with pregnancy.

Pretty also did not like her bodily changes:

I did not understand what was going on with my body. I saw like my body is starting to change.

Busi thought she was becoming a different person, caused by her pregnancy:

When the stomach started to grow, I felt like a different person, not the one I was.

Gaining weight affected Nomasonto who indicated:

I became very fat and sleeping most of the time.

The responses were consistent with Max's (1993:55) assertion that teenage pregnancy impacts normal adolescent physical development by promoting gestational weight retention common among postpartum women. Thus most adolescents fail to come to terms with a body weight and body image which they generally abhorred (Max, 1993:55). The researcher came to the conclusion that teenage pregnancy could have negative implications for the adolescent mother and her child's health and physical wellbeing.

5.3.2.2 Theme 2 Social life implications

The participants were asked: *How did teenage pregnancy influence your life as a teenager?* A wide range of responses showed that pregnancy interrupted the participants' interactions at home with family members, at school with friends and teachers and also with other people in their community settings. Hence their social life and their social development were impacted upon.

All the participants showed that they were no longer free to interact with friends at school and out of school, so pregnancy impacted negatively on their social life and development. The researcher asked about friendship developments during pregnancy. Nomasonto, just like most of the participants, revealed that her friends turned to be her enemies and she did not feel free to interact with them:

Friends but enemies. Some went behind my back. I distanced myself with them.

Apiwe felt very bad about what her friends were saying about her pregnancy situation:

At school they said bad things about me, gossip about you. When you pass through them they laugh at you. In that way you feel small and even say I better go home rather than do something bad.

The researcher established that even those friends who suggested sexual relations with boyfriends turned against the participants by gossiping about their pregnancy situations. The participants' responses confirmed Chigona and Chetty's (2008:144) explanation that pregnant adolescents are not always well received by their peers, and it fuels a sense of isolation and stigmatisation which undermines their experience of school as a nurturing space. Kelly (2004:34) also posits that some pregnant adolescents face negative stereotyping from other students and sometimes teachers, which are manifested by labels such as "stupid sluts", and "welfare moms" and "neglectful mothers". Such negative stereotypes are fertile grounds for social frustrations which do not promote normal adolescent social development.

Participants revealed that the state of being pregnant and the responsibility of looking after the infant were so overwhelming that they lost their freedom as adolescents to come and go like before, including going to church. Hence they were affected socially and spiritually. Nqobile, like other participants, was overwhelmed by child care responsibilities. She revealed one dimension in her thoughts, different from other participants, when she said:

I was still young and I wanted to go to church a lot. At my church if you have a baby you must stay 6 months before you go to church. My mother was at work even weekends so she said I must stay with my child. Don't go anywhere. When my friends were preparing to go to church and I could not I was saying to myself why must I not kill this baby and give me space to go where I want to go?

Thus Nqobile thought of killing the baby to give herself freedom which she was no longer getting because of the baby.

Apiwe wanted to stay at home but her mother forced her to go to school:

The more the body grew the more I became very shy then I told my mom I no longer want to go to school until I have a baby but my mom refused. The baby took a lot from me. Experiencing teenage pregnancy was not good for me as a teenager. I had to take care of my baby, fetch her from the crèche, stay with her at home doing homework. No freedom at all.

Pretty decided to keep to herself at home for fear of being seen by people:

I could not go even to the streets. I was always staying at home. I was scared that maybe if people see me like this they would not even speak.

The empirical evidence above supported Booker's (2010:2) findings that adolescent pregnancy can rob an adolescent of her youth. While some adolescents are out there having fun, the pregnant adolescent may have to stay at home nursing her sore feet or back or may spend her time preparing for the baby's arrival (Booker, 2010:2; Wood, 2012:3). In so doing, the social life of the adolescents is disturbed because adolescents normally like to go out with friends. The participants' lack of freedom supported the theoretical framework of Erikson's psychosocial theory. Erikson (1968:255) argues that adolescents face a crisis between identity and role confusion. This crisis involves balancing the desire to try out many possible selves and the need to select a single self (Kail & Cavanaugh, 2007:340; Sternberg & Williams, 2010:77). When pregnancy interrupted that process by taking away her freedom to come and go, as evidenced by the participants' responses, then the adolescent faced a crisis of identity confusion. Identity confusion thus interrupted normal adolescent social development.

On a different note from those above, the challenges of motherhood were quite overwhelming for all the participants. They depended entirely on family members for support and child care, thereby subjecting themselves to a more dependent position that contradicted the adolescents' quest for independence. Apiwe could not take care of the often crying baby so she relied on her mother for child care:

I was scared of babies. The baby cries a lot. When the baby cried I would take her to mom and mom would take care.

Letiliswe, just like all the other participants, depended entirely on adults for child care when she reported:

My grandmother did everything until she had an accident; her hand was broken, so I had to take her to crèche and my sisters helped me with fees for crèche.

The challenges of motherhood that were reported by participants were in keeping with Oyedele, Wright and Maja's (2014:80) findings that adolescent mothers face a challenge of a sudden role transition from adolescence to the adult role of motherhood. The participants' responses therefore indicated that they were caught between two competing roles, that of

adolescence and adulthood, hence they found it very difficult to cope. According to Erikson's (1968:174) psychosocial theory, adolescence is a transition stage whereby adolescents seek to be independent. The empirical evidence above suggests that when pregnancy occurs during adolescence, the typical drive of moving from a more dependent relationship to an independent relationship is disrupted because the teenager may not be able to look after herself and the baby (Herzog et al., 2007:245). In other words, teenage pregnancy affected social development by its tendency to interrupt the normal lines of maturation of female adolescents.

Although all participants relied heavily on family members, the majority of the participants also indicated that their family interactions were disturbed because the family members, such as parents and sisters, found it difficult to accept the pregnancy. The participants were no longer able to interact freely with family members. In some instances, the participants failed to do their normal household chores due to fatigue and other pregnancy related challenges, thereby increasing tensions in their homes.

Precious, for instance, felt very ashamed to face her parents upon knowing that she was pregnant. She said:

It's difficult to face your parents.

Makhula felt isolated and unacceptable in the family when she revealed:

When you fall pregnant you think you are no longer acceptable in the family. You have lost your friends. People they do not take you serious, talk to you and love you. They laugh at you.

Nxoliswa indicated that family members might lose their trust in you when you fall pregnant:

Friends and some of the house parents at home lost faith in me; others were judging me, saying that I will never go anywhere now that I have a baby. My life fell apart.

Nomasonto could not do her normal duties at home and indicated that she felt uncomfortable about it:

I was sleeping most of the time. I did not clean the house, no going out; I was sleeping most of the time.

The limited family and peer interactions revealed by the participants above indicated that pregnancy could negatively affect the social life of pregnant teenagers. Meece and Daniels (2008:446) posit that the family is the child's primary source of support and nurture in early development; hence family settings are quite powerful in influencing adolescent social behaviours in particular. When family interactions were disturbed by pregnancy, as

evidenced by the participants' responses above, social development was also interrupted. From the broader perspective of community interactions, all participants were ashamed of their pregnancies in such a manner that they did not interact with people in their communities. They were socially excluded from society mostly because of negative stereotypes and stigma associated with adolescent pregnancy.

Nomasonto, like most of the participants, felt socially excluded:

I was nothing to the world. I was feeling lonely; I felt being avoided by friends, families and teachers.

Makhula revealed that a pregnant teenager could face ugly comments from people in the community:

People say you are too small. What you did is not for children to fall pregnant.

Nxoliswa was advised to follow traditional customs which limited black pregnant women's movements in the community for fear of endangering the unborn baby:

I would not do anything at the children's home they said I must stay indoors. All the black mothers said you cannot go in the streets when pregnant they will 'tie' you (harm your baby). So I did not have the chance to go out with friends.

The responses of participants supported literature findings that teenage pregnancy can affect the social development of pregnant adolescents by promoting social exclusion. Due to cultural views about early or unwanted pregnancies, some pregnant adolescents may feel isolated and rejected by people. The empirical findings were in accordance with Domenico and Jones' (2007:6) findings that society tends to stereotype all adolescent mothers in an unfavourable manner. Vincent (2012:4) explains that "pregnant adolescents create discomfort and wariness in people through their embodied confirmation of uncontained and unconstrained adolescent sexuality". Hence the adolescent mothers might not have felt welcome in their families and communities, thereby resulting in social exclusion which interrupted normal social development.

5.3.2.3 Theme 3 Psycho-emotional wellbeing

The empirical evidence revealed that teenage pregnancy impacted on participants' emotional/psychological wellbeing. The participants were asked how they felt when they fell pregnant. Mpunza openly revealed that she lost hope. Nxoliswa was shocked by the unexpected pregnancy and reported:

I was shocked I could not even want to tell him.

Gloria saw a bleak future for herself and said:

When I fell pregnant I thought it was the end of the world.

Nobuhle had no hope for the future when she said:

I told myself that was the end of my future.

Thando anticipated a hard time with parents:

When I fell pregnant I was almost dead because I was a teenager and was thinking my father was going to beat me.

Letliswe, like all participants, was emotionally overwhelmed by her pregnant condition and responded in the following way:

It was a shock. I was not expecting to be pregnant at the age of 16. I was so scared. I did not know what to do.

The responses of the participants, above, indicated that unwanted pregnancies could be a major source of distress. Max's (1993:19) findings that all girls, regardless of pubertal timing, would experience some distress because of physical changes, but when pregnancy came on top of that the level of distress would be enhanced, were supported by the findings of this study. Max (1993:19) also explains that events that are considered to be occurring out of synchrony, either earlier or later than expected, are more stressful than normal developmental changes; hence the unexpected teenage pregnancy may be the cause of major adjustment difficulties.

The researcher enquired about the experiences of raising a child. The empirical evidence which follows suggests that the responsibility of raising the child was very stressful for all participants. Nqobile's circumstances were similar to the majority of participants because there were limited resources such as food and money to take care of the baby:

I had to pump milk for the baby. My mother did not have enough money to buy milk. Sometimes my breasts did not have enough milk. Then sometimes I left a small bottle. But when at school I was thinking maybe the milk is finished and the baby is crying. I did not focus well at school.

Nqobile, like many other participants, also revealed that the day to day care of the baby was not child's play:

It was a child who cried too much. At night you do not sleep. You had to wake up. Another day stomach, another day ears. I found it very difficult in my life time. Even teachers asked what's going on? I told them my mind was stressed because my father left my mother and now I bring a child on top of it.

The empirical evidence and literature findings also indicated that when a teenage mother received inadequate or no support from family members it could be a major source of psycho-emotional instability. Some of the participants felt bad about not getting support from close people and their boyfriends. Nxoliswa, for instance, revealed that:

I never got the support that I needed. Even my boyfriend was not there for me and I am staying at the children's home. So it was bad for me because everyone was just judging me. You know going through those ugly comments made me feel I was alone. I did not have any of my family members to support me because I had none.

Stuart and Wells' (1992:36) findings show that adolescents are usually not prepared for pregnancy because pregnancy conflicts with age appropriate developmental needs. In other words, teenage pregnancy brings emotional and psychological problems to a still developing adolescent especially when the adolescent does not receive enough support, both emotionally and materially, from parents, family members and the father of the child.

Some of the participants felt out of place and had a great sense of guilt. Apiwe, like many other participants, explained that she experienced a great sense of guilt:

When I fell pregnant I was very shy because I told myself what would other people think of me? This girl out of all the girls. This one. So I was scared.

Nomasonto had no comfort at all because of her pregnancy situation and stated:

Eh sir it is very difficult. People were just looking me down. I was having low self-esteem. I did not have self-confidence. Some people were just gossiping about me. That made me to feel like am nothing.

The responses of participants, above, supported Erikson's (1968:174) psychosocial theory that postulates that during psychosocial development there are sensitive points of development which he called crisis points. The crisis, according to Erikson, is a turning point of increased vulnerability or enhanced potential, so pregnancy created a crisis for adolescents by making them vulnerable to negative reactions from people (Arnett, 2013:157; McDevitt & Ormrod, 2010:404). The researcher concluded that teenage pregnancy and motherhood had serious implications for the pregnant adolescents' psycho-emotional wellbeing, to such an extent that some of the participants felt their world had fallen apart.

5.3.2.4 Theme 4 Educational implications

The participants mentioned that their school life was disturbed, as evidenced by their lack of concentration, interrupted schooling and low school achievements.

The responses of participants indicated that the dual responsibility of caring for the baby and that of school responsibilities disturbed participants' concentration. Nomasonto found it difficult to concentrate on school work. She indicated:

Life was very difficult especially at school. I did not concentrate well because I had the responsibility of a mother and that of a student.

Nqobile, who was always visiting the hospital due to her unhealthy premature child, found it very difficult to prepare and sit for examinations:

During exam time, I was doing Grade 8 and I wrote only two subjects, the rest I was in hospital. I went to hospital because my baby was very sick. In Grade 7 and 8 I did not cope well at all.

Apiwe, like many other participants, revealed that she could not study properly because she had to give the baby attention at home:

My school work was disturbed. Sometimes I found out I had to study, she is crying, I am alone, my mother is at work. Whilst I am studying she would cry.

Empirical evidence and literature findings revealed that adolescent mothers' regular attendance at school was disturbed due to child care responsibilities. Similar to the responses of the majority of the participants, the following participants reported that they were sometimes absent from school and, in some instances, discontinued school for several months. Mpunza, for example, discontinued school for a while:

I discontinued with school and then began again. I was thinking of the books and on the other hand, the child. I did not have even enough time to study because I needed to breastfeed the child; I needed to study so I did not have enough time.

Pretty, like many others, stayed at home for a long time after giving birth. She said:

I stayed for almost one year at home it was 2009 until I gave birth. So I stayed at home.

Nobuhle, like many of the other participants, was often absent from school:

I used to be absent to go to the clinic with the baby.

Thando was sometimes not feeling well so was advised not to come to school:

My teachers advised that when I am not well do not come to school. So there were times I did not go to school.

The empirical evidence and literature also suggested that adolescent mothers' academic achievements were negatively affected by pregnancy and child care responsibilities. Most of the participants indicated that they could not study and therefore failed examinations as a result. Letliswe, like many other participants, failed examinations and said:

Oh before the baby arrived, I had missed two exams and I failed at school. I did not blame my teachers, when I failed it was my mistake.

The empirical evidence above was supported by Domenico and Jones' (2007:7) findings that adolescent pregnancy can pose major challenges to school attendance and completion and is one of the reasons cited by female secondary students for dropping out of school. Thobejane's (2015:274) report that teenage pregnancy compels the teenage mother to drop out of school if not properly supported is in line with the participants' responses. Similarly, Meece and Daniels (2008:161) explain that no real intellectual activity can be carried out in the form of experimental actions and spontaneous investigations without free collaboration among individuals, implying that if pregnancy disturbs the social environment, the female adolescent's cognitive development at school may be negatively affected. The participants' responses above indicated that pregnancy interfered with their social environments at school and at home.

Woolfolk (2010:50) indicates that, according to Vygotsky's sociocultural theory, the child is not alone in the world of discovery, but is assisted or mediated by family members, teachers, peers and even software tools such as computers. Through both informal interactions and formal schooling, adults convey to children the ways in which they can interpret the world (McDevitt & Ormrod, 2010:210). In other words, cognitive development also takes place in interactional settings, be it at home or at school. The responses of participants showed that most participants had an interrupted school life during pregnancy and after giving birth. At home they were not emotionally ready to interact meaningfully with parents and siblings especially about school work; hence their intellectual growth was severely disturbed, resulting in school failure. The researcher concluded that when an adolescent became a mother her school life was adversely affected.

5.3.2.5 Theme 5 Post-pregnancy sexual behaviours

In a bid to explore participants' post-pregnancy sexual behaviours, the researcher asked participants: *How would you say pregnancy and childbirth influenced your sexual life?* Most of the participants in this study indicated that they were still dating. Some were still dating the same men or had started other relationships when their boyfriends abandoned them. The participants indicated that it was not easy to abstain after falling pregnant. However, the majority of the participants indicated that they were no longer scared to go to the clinics to

obtain contraception although they used them inconsistently. The participants also revealed that some girls continued to fall pregnant to access child support grants.

The participants below indicated that they could not stop indulging in sexual activities. Apiwe, for instance, revealed that she was still dating the father of her child:

After my baby I am still with this guy, the father of my baby. He was with me, we are still dating.

Angel indicated that it was no longer easy to abstain. She said:

It is not easy sir because when you start having sex when you are young is not easy to stop.

The responses of participants showed the impact of teenage pregnancy on adolescent sexual behaviour. The sexual behaviours of participants after falling pregnant were in line with literature findings (e.g. McDevitt & Ormrod, 2010:162) that suggest that puberty, when coupled with pregnancy, seems to promote loosening restraints on problem behaviours such as adolescent sexuality, hence the likelihood of repeated pregnancies. According to Mkhwanazi (2010:347), teenage mothers are more likely to have a second child while still a teenager. It implies that once pregnancy occurs the adolescent finds it difficult to refrain from sexual acts, therefore many adolescents end up having repeated pregnancies.

However, Angel, like many other participants, indicated that after pregnancy they were no longer scared to visit the clinics to access contraception:

Yah, once you have a baby, you are no longer afraid to go to the clinic.

The researcher, however, believed that repeated pregnancies that were indicated by the participants were most likely caused by inconsistent contraception and probably the need for child support grants. The participants revealed that some girls continued to have babies to access child support grants. Apiwe cautioned by saying:

Stop giving grants, girls are having so many babies because of grants.

Mpunza observed a pattern of other adolescent mothers by responding that:

They do go for the child support grants of government because some of them the first child is a mistake but the second one you really need social grant money. Because now we have girls with four kids.

Nobuhle, like Mpunza, indicated that some girls continued to have babies in order to access child support grants:

Someone has three children at this school. With three children you get more than a thousand rands.

Thobejane (2015:274) also found that child support grants contribute to the high incidence of pregnancies amongst young people. Female adolescents can only access the grants by falling pregnant. As a result, teenage pregnancy is indirectly influencing inappropriate sexual behaviours by reinforcing adolescents to engage in premarital sex and continue to have out of wedlock children for the sake of accessing child support grants.

Some of the responses by participants showed that teenage pregnancy and adolescent sexuality was becoming the norm in some communities. Intelligent, for instance, indicated that her friends saw pregnancy as something common, hence there was no need to stress about it:

My friends said to me, 'You are not the first one to fall pregnant. We will continue to give you the love you deserve.'

Nqobile revealed that some girls got pregnant to elevate themselves to adult status, free from parental control:

Some girls fall pregnant to be free from home. No more control when you are a mother.

Similarly, Gloria revealed that there was sort of a pattern amongst their friends for childbearing:

We were four friends and three of them had babies.

The participants' responses were supported by Jewkes et al.'s (2001:733) findings that for most of South Africa prior to marriage, premarital sexual activity is the norm and premarital childbearing and impregnation are socially accepted, signifying a state of immorality. The researcher concluded that when female adolescents engage in sexual acts at any early age, a pattern is set and it will be very difficult to stop. The researcher also found that after falling pregnant, female adolescents were freer to continue dating and even to visit the clinics but in most instances they remained inconsistent contraceptive users.

5.3.3 Category 3: Contributing Factors

Bronfenbrenner (1979:3) stresses that the development of individuals takes place in a variety of contexts or systems that extend from the immediate physical environment of the individual to society in general. Categories 1 and 2 discussed above focused on participants in their immediate environments. Category 1 emerged as participants responded to the question: *How did the world of being a teenager influence your sexual behaviour and your decisions around pregnancy?* Category 2 emerged as participants responded to the question: *Tell me about the*

time when you fell pregnant. How did your pregnancy influence your life as a teenager? In other words, categories 1 and 2 focused on the influences within the microsystem in which the female adolescents were directly involved.

However, as the participants were responding to the two questions above and also to the main question: *Tell me about your experiences of falling pregnant as a teenager*; the influences of the participants' broad social contexts emerged. This category focused on the external influences or subsystems mostly at the macro level where the female adolescents were not actively involved but their thoughts, perceptions and feelings were indirectly influenced. Following the responses of the participants, four themes emerged as follows: Socio-cultural influences, change in community lifestyles, socioeconomic factors and social media.

5.3.3.1 Theme 1 Socio-cultural influences

From the responses of participants, two sub-themes which addressed the above theme emerged namely: Familial support and kinship network patterns as well as cultural values and beliefs.

Sub-theme 1 Familial support and kinship network patterns

The responses of participants showed the influences of strong kinship network patterns, especially amongst African cultures, on teenage pregnancy. Most of the participants reported that they got parental, grandparental and family members' support during pregnancy and in looking after their babies:

Nomasonto left her baby with her mother while she went to school, after the mother agreed to her request:

I asked mom to take care of the baby while at school so that I would have more time with schoolwork.

Busi was not only assisted by her parents but also by the mother of her boyfriend. She explained:

I told my parents that I was pregnant. They told me that I must not abort the baby. I must keep it, they will support me. They did everything for my baby, and then they told me that I must go back to school. They stayed with my baby but the mother of my boyfriend took the baby because my mother was drinking too much.

Letliswe's family came to her rescue when she had no idea of what to do about her pregnancy. She responded to the question about support systems:

I did not know what to do but because I had a supportive family they comforted me and tell me that everything I will do they will support me, so I decided to keep the baby because is a blessing from God.

Nicole's extended family was there for her and the baby. She said:

I was supposed to stay at home but my grandmother helped me. She came with me here at school every day. My father is still alive and my boyfriend's father was also supporting.

The support of parents and extended family members (in African cultures) in raising the adolescents' babies indirectly encouraged the adolescents to bear children and continue with schooling. Slonim (1991:19) explains that

... collectivist African cultures have strong roots in their African heritage; the African heritage of kinship bonds and role flexibility. Because of strong kinship bonds, African female adolescents may find nothing wrong in leaving their babies in the care of older members such as grandmothers and aunts, thus it promotes adolescent childbearing by lessening the burden of child care.

Panday et al. (2009:13) also assert that "South Africa's liberal policy that allows pregnant girls to remain in school and to return to school post-pregnancy has protected teenage mothers' educational attainment but also influences pregnancy rates of female adolescents". The researcher came to the conclusion that, although kinship networks in African cultures came to the rescue of the adolescent mother by providing child care, it could also indirectly reinforce adolescent childbearing. The female adolescents who were not yet pregnant might develop the mistaken belief that if they fell pregnant, people at home could always take care of the baby whilst they continued with school.

Sub-theme 2 Cultural values and beliefs

The influences of customary practices, values and beliefs amongst African cultures emerged from the participants' responses. Participants' responses pointed out that most of the African parents and elders did not talk much about sexual matters with their children. Hence the participants indulged in sexual relationships without adequate information from parents about safe sexual practices in particular. Nomasonto, for instance, reported the inadequacy of parental communication:

Parents do not want to talk about sex but they are not aware that teenagers need the truth.

The researcher wanted to know whether parents ever talked about sexual issues at home but Precious was quick to say:

No No No totally No!

The researcher enquired about their source of sexual information. Precious indicated that friends were one of the major sources of sexual information:

Friends talk about sexual matters.

Angel revealed that she did not understand why her parents treated sexual matters in such a secretive manner:

My parents will tell you do not have sex you are still young but they do not advise you in a way that you will understand. They tell you those things as if they are scary. Black people follow 'Amatraditions' of don't do this, don't do that. Then I was like saying to myself let me try those things, I want to know why. That's how I started.

Thobejane's (2015:274) findings that "sex is still a taboo subject to be spoken about in most of the villages in South Africa", support the above notions of participants. Thobejane (2015:274) also explains that there is a huge communication gap about sexual issues between parents and their children in most African cultures. African cultures, according to Plummer and Wight (2011:129; Kelly, 2001:6), see sex as a taboo topic for discussion and they mostly view school based sex education unacceptable, hence misinformation and myths about sex are often distributed. Moore and Rosenthal (2006:240) also assert that African parents in particular, find it difficult to communicate with their adolescents about sexual matters. It meant that most African female adolescents might engage in sexual acts with inadequate information from parents, hence they could fall pregnant.

Participants revealed that some of the African customary practices, cultural values and beliefs contributed to teenage pregnancy by instigating them to engage in early sexual encounters. Some participants talked about the influence of initiation schooling, a customary practice prevalent in most African cultures in South Africa. Mpunza, explaining about the influence of initiation practices on sexual acts, said:

After going to the mountain (initiation) they want to prove that they are now grown up man. We are no longer boys. When we call them boys, they just look at you and say, 'Stupid. You are calling me a boy, I am now a man.'

Angel revealed that she felt compelled to have sex with her boyfriend after initiation schooling:

I started dating in Grade 8. He was my first boyfriend. Then in Grade 9 he went to School Mountain (initiation school). Then there was this peer pressure with friends who told me, 'If your boy comes from the school mountain, you need to sleep with him.' You see, peer pressure with friends.

The researcher asked Angel to elaborate: *Are you saying that when boys come from the School Mountain they want to prove their manhood?* Angel reported:

Yah Yah. That is what my man said. I also said okay my man is now circumcised I would like to try.

Intelligent also revealed the respect given to boys after initiation by saying:

If you are like a Ndebele boy who has gone for initiation school then come back. After you have come back, there is this tendency they are saying, if you went there to that mountain, you come back as a man. Now that you are a man you are respected just like a father is being respected.

The influence of customary practices such as initiation practices was consistent with literature findings. According to Vygotsky (1978:86), an individual's thinking patterns are not primarily due to innate (biological) factors but are a product of cultural institutions and social activities such as family socialisation practices. The pressure to prove one's manhood in African cultures, especially after initiation and circumcision, is supported by Vincent's (2012:34) explanation that the value of fertility in some African cultures can force people to believe that a person becomes a real man or a real woman by having a baby or by engaging in sexual acts. Thobejane (2015:274) also contends that in African cultures it is believed that a boy must go to initiation school to be given lessons about manhood but these lessons may have an unintended purpose to lead them into early sexual activities, as indicated by the participants above.

The majority of participants in this study did not decide to abort the baby, thereby signifying their respect for life. The participants were asked: *Tell me about your experiences of falling pregnant as a teenager.* All the participants in this study decided not to abort the baby despite the pressure of unwanted pregnancy. Apiwe's mother did not believe in abortion as a solution to her unwanted pregnancy:

I thought of abortion but eish was scared because I did not tell anyone. I decided to tell my mom, who became very furious but she told me that I did the right thing not to do abortion.

Busi decided to keep the baby. She gave the following explanation:

We were in love. I did not plan to have a baby. It just happened. I did not know what to do but I decided to keep it. My parents told me I must not abort the baby, I must keep it, they will support me.

Nxoliswa was determined to have an abortion because she had no one to look after her baby, but her young age was a problem according to clinic staff:

I wanted to make an abortion because I could not afford to have a baby, I was still young and I did not have anyone to take care of the baby. When I went to the clinic the nurses told me to go and see a doctor because they said I was still young so they were afraid it could be dangerous.

Even though most of the participants at first thought of abortion, all participants finally decided to keep their babies. Most parents were against the idea of aborting the baby. Vincent's (2012:27) research revealed that young women from socially deprived areas, which include many African families, are more likely to hold anti-abortion views and will perceive motherhood in a more positive light, even when they are young or unmarried. The participants' responses also confirmed the value of fertility in most African cultures where children were viewed as priceless gifts. Hlapa (2006: 17) concurs by asserting that motherhood is an important path to social status and personal achievement in black African cultures especially because children are widely regarded as a great gift and blessing, hence abortion is not a viable option for them.

The participants also showed that they did not make a conscious decision to become pregnant, neither did they have cultural pressure to become mothers. The participants' responses thus refuted Hunter's (2010:17) findings that in some South African cultures, such as in Limpopo, it is culturally wrong for a woman to reach 21 without a baby. Although most of the participants learnt to love their babies, they acknowledged that it was against their cultures to have babies as adolescents.

The influence of gender inequalities which characterise many African cultures, especially in sexual negotiations and pregnancy prevention, was also elicited by the participants' responses. In other words, male dominance in sexual negotiation and prevention was exposed in this study. Nqobile exposed sexual coercion, if not date rape, in her explanation:

When I was going to school one morning I went via his house. He said, 'Every day you come here and we do nothing. Why do you come here and do nothing?' He locked the door and put the keys outside of the window and said, 'You are not going anywhere.' We slept and had sex; I did not go to school.

Nqobile was also discouraged by her boyfriend to use any prevention:

He was saying, 'Why should we prevent? If you go and prevent I will see that you are preventing.' I did not know what he meant. So I was confused.

Letliswe did not want to make her boyfriend angry by refusing to have sex. She reported:

Each time he said he wanted to sleep with me I used to refuse because I was not ready. When I refused he got very angry.

When the researcher asked if her boyfriend used condoms Letiliswe responded:

He said he always wanted to use condoms but he said that if he uses a condom he does not feel anything. So ah I told myself that he has got experience I should listen to him.

Many participants put the responsibility of prevention on the boyfriends instead of taking precautions themselves, but the boyfriends proved to be inconsistent condom users. Gugu's boyfriend was using condoms inconsistently. She said:

I did not go to the clinic to prevent and my boyfriend did not always prevent.

Busi's boyfriend opined that where there was mutual trust there was no need for protection:

He said he trust me and I must trust him, so there is no need to use a condom every time.

Literature findings (e.g. Iliffe, 2005:264) support the empirical evidence above about male dominance in sexual negotiations in African cultures. Kail and Cavanaugh (2007:352) explain that female adolescents of African cultures are often at risk when they adhere to traditional gender stereotypes which let them believe that sexual coercion is a normal part of romantic relationships. Gender inequalities mostly deny the female adolescents the opportunity to express their desires to insist on condom use or refuse to have sex (Hunter, 2010:13; Iliffe, 2005:264). Voydanoff and Donnelly (1990:71) posit that

... an external sense of locus of control which characterise most African cultures is positively linked to having a child out of wedlock, because the female adolescent may not be independent enough to take decisive action to avoid pregnancy, such as insistence on condom use to an uncompromising male partner.

The researcher concluded that some of the African cultural values, beliefs and customary practices could influence the adolescents to engage in risky sexual activities.

5.3.3.2 Theme 2 Change in community lifestyles

South Africa is a society in constant transformation due to global influences (Afolayan, 2004: 200). Globalisation constitutes a multiplicity of linkages and interconnections that transcend the nation states (and by implication the societies) which make up the modern world system. It defines a process where events, decisions and activities in one part of the world have a significant consequence for individuals and communities in distant parts of the globe (Ballard & Schwella, 2010:737). South Africa and its communities cannot ignore global influences; hence the notable changes in community lifestyles. Despite the fact that most of the participants in this study came from mostly farm, rural and semi-urban environments, global

influences emerged from their responses. From the responses of the participants, sub-themes that reflected changes in community lifestyles due to global influences emerged, namely: internet usage and cyberspace access, adolescent freedom, consumer lifestyles and labour migration.

Sub-theme 1 Internet usage and cyberspace access

The participants' responses showed an increase in internet usage or cyberspace access that connected them to the rest of the world and to information about a variety of topics like, for instance, sexual matters. Intelligent was advised by her friends to access information through the internet:

My friends said, 'You are a child because you are not doing the stuff we are doing.' Then I said, 'What stuff?' The other one started to tell me, 'Having sex.' Then I said, 'What is that?' They did not bother to explain but said, 'Go and Google, you will find out.'

Mpunza showed that she was communicating with people she did not even know on the internet and social networks:

I was chatting with people; even now I do not know them. Even in internet people Google about stupid things.

Some participants revealed that they accessed pornographic materials on the internet. Gloria revealed that some girls got pornography from the internet:

We love watching it with friends and partners.

Intelligent also indicated that girls liked to watch pornography:

Through internet girls see pornographic pictures.

Precious revealed she knew how to access pornographic materials on the internet:

There is a website for pornography only. Those who access internet they view even YouTube.

Yon (2000:5) reports that "globalisation signals the rapid circulation and flow of information, commodities and visual images around the world", therefore female adolescents may develop a revised self-image (a global self-image). Intercultural contact has increased exponentially through the global mass media, advanced communication systems and information technology (Rhoads & Szelenyi, 2011: 4; Salili & Hoosain, 2007:xi) widening the interaction of adolescents with other cultures in the process. Anyone with a computer today is a citizen of the world because she will be interconnected to the rest of the world (Eitzen & Zinn, 2006:4). The researcher came to a conclusion that, although there were a lot of positives

about Internet access such as exchange of knowledge and information, inappropriate sexual information was also readily available to the adolescents through Internet usage.

Sub-theme 2 Adolescent freedom

The participants' responses revealed the influence of their independence and freedom, especially on their social behaviours and sexual expressions. The responses of the participants below signified female emancipation and gender equality which were values that were shared globally. Nicole showed that she was free to come and go in the community as she wished:

Every Saturday, my friends were coming to me to ask me to bath and then go out. We went to the park, where there are many boys and girls, packed and clapping hands. At the park we were sitting, eating and dance. Later we go home but some of my friends went to the tavern.

Angel used to go out as often as she pleased without parental restraint:

Before I fell pregnant, I was an outgoing person. I was partying so much. I liked friends.

Angel indicated that they were drinking alcohol:

Drinking alcohol, go out with friends. Go to party, house party, where we would drink alcohol, come home in the morning, the following day.

The responses of the participants also showed that there was little restraint when it came to premarital sex in the world of the adolescent. Angel revealed the sexual behaviours of girls in the taverns:

They (men) ask you, 'Can I buy you a beer?' and you say, 'Yes.' After you have drunk it you pay back by having sex with the person.

Intelligent revealed the perceptions of some girls about sexual acts:

You see it's like being engaged in sexual intercourse it's like fun, to show that you can play, I can also do this.

Letiliswe indicated that indulging in sexual acts was fashionable:

My friends were always saying that, 'Why are you not sleeping with boys?' I said, 'No, I am not ready.' They said, 'Ah you are out of fashion.'

The freedom of the participants to come and go as well as less restraint on premarital sexual activities was confirmed by Moore and Rosenthal's (2006:111) findings that "female emancipation promotes among other things, sexual equality which diminished women's dependency on marriage and on males in general". The freedom and independence of women have to a certain extent brought equality in sexual expression between males and females,

consequently widening their chances of sexual exploration. Basic perceptions of the function of sex (which is a marital affair) and the role of women in general have changed, hence more and more female adolescents in this global world are becoming freer in their expression of sexual matters (Moore & Rosenthal, 2006:111). Moore and Rosenthal (2006:7) explain that “globalisation and modernity have influenced the onset of a sexual revolution which to a greater extent is characterised by more permissive attitudes towards sexuality and greater concern for personal fulfillment”.

Afolayan (2004:200) explains that when young men and women are shielded away from the watchful and censoring eyes of elders, they become more proactive in exploring their sexuality by engaging in premarital or nonmarital sexual intercourse. It meant that adult censoring of adolescent sexual behaviours, in urban areas especially, was slowly slipping away. The researcher concluded that increased autonomy of adolescents provided more opportunities for sexual activity (Plummer & Wright, 2011:129).

Sub-theme 3 Consumer lifestyles

The participants showed their love for money and material goods which they got from rich older men. The participants indicated that they were attracted to rich men who could provide them with money, clothing and alcohol. Letliswe revealed the lifestyles of girls with rich older boyfriends:

My friend told me that she is dating older men with Range Rovers, Fortuners and Jeeps. The older men are called ‘Blessers’ nowadays.

Letliswe also revealed that:

Some school girls are always at the tavern. They go there. After that they sleep with men (rich older men).

The responses of participants indicated the general lifestyles of adolescents, especially in urban and semi-urban settings. The empirical evidence was in line with McLachlan’s (2001:1) findings that the mass urbanisation of rural people and the greater degree of racial and cultural integration that has occurred in South African cities and towns has also had the effect of weakening the hold of traditional cultures. The attraction of participants to rich older boyfriends was in line with McLachlan’s (2001:10) findings that “everyone wants a television set, motor car, a cell phone and a hamburger in this modern world”.

Alcohol abuse by participants influenced them to engage in unprotected sexual activities that resulted in their pregnancies. The empirical findings of alcohol abuse by adolescents

supported Nandi et al. (2014:670) who also found that there is a correlation between teenage pregnancy and alcohol abuse, especially in developing countries. Miles' (2000:49) findings confirmed that the young people of today appear to be struggling to come to terms with what it means to be a young person in a changing world (the global world).

Sub-theme 4 Labour migration

The participants' responses revealed that the need for money and material possessions in this global world forced parents to leave their homes to seek employment but in most cases it meant leaving adolescents without supervision. Thando indicated:

He came to my home when my mom was not there; we were not staying with my father. My mother goes to another job. She was working in a kitchen for certain whites. She was staying and sleeping there.

The Philippine Human Rights Center (2014:2) confirms the above responses by asserting that social realities like labour migration also shape and influence the behaviour of adolescents because as a parent or both parents leave the family home to work somewhere else, children acquire a sense of independence. Because they are alone at home, most adolescent sexual encounters take place at home (The Philippine Human Rights Center, 2014:2). The researcher came to the conclusion that globalisation had indeed fostered the breakdown of traditional society and was creating a new order in which money, access to information and latest technologies in this modern world counted (Maclachlan, 2001:2).

5.3.3.3 Theme 3 Socio-economic factors

Low socio-economic status was one of the themes that featured prominently in the interviews because the participants came mostly from farm, rural and semi-urban environments with low or middle income households. The responses of participants could be grouped into two sub-themes as follows: Family structure and economically advantaged school boys and rich working men.

Sub-theme 1 Family structure

Silbereisen and Todt (1994:119) note that adolescents from low socio-economic families often experience erratic and rejecting behaviours of parents. Bergin and Bergin (2012:402) explain that children from low socio-economic environments experience harsher parenting practices because parents with financial stress tend to treat their children with more hostility. When children lack a strong primary caregiver due to low socio-economic status, they face

emotional and social instability (Taylor, 2012:2). Busi indicated that she was always treated with hostility by her mother:

When she is drinking she likes to shout at us at home, me and my sisters. Sometimes kicking us out of the house. When something is missing at home she always blamed us.

Mpunza received harsh parenting from her grandmother that later led her to leave home to go and stay with an unreliable boyfriend:

My life was very tough sir because I lived with my grandmother and aunt, my mother died when she gave birth. After that she died. Then my grandmother abused me. She always beat me and did silly things to me.

Pretty also experienced a violent mother:

Sometimes she was violent like she can call me some names or she can beat me in front of people calling me names. So my childhood was eish not good.

The inappropriate behaviours of the primary caregivers as indicated above were in line with literature findings. Silbereisen and Todt's (1994:119) findings revealed that substantial loss of family income leads to increasing emotional strain that promotes problem behaviours in adolescents. Literature findings (e.g. Vincent, 2012:18) indicate that adolescent pregnancy can be a result of adolescents trying to obtain gratification of nonsexual needs which they may not get from home such as security, closeness, acceptance, attention and affirmation as a loved and valued person. The researcher concluded that due to financial instability in some families the primary caregivers, who were mostly mothers and grandmothers, turned hostile and abusive, forcing the participants to find love and acceptance from unreliable boyfriends who later caused their pregnancies.

The majority of participants indicated that they were raised in single female-headed families, which were also associated with low socio-economic status and weaker parental control of adolescent dating habits. Pretty showed that she was free to come and go to see her boyfriend:

I went there at night to sleep with him. He came to fetch me, then in the morning he brought me back.

Pretty revealed that her single mother approved her dating habits. She explained:

She saw something. She was angry but at the end she accepted it because it was only one boy.

Literature findings have documented the inadequacies of single parenthood in supervising and controlling adolescent sexual behaviours. Parke and Clarke-Stewart's (2011:31) findings

revealed that many low socio-economic families have high levels of single female-headed families, therefore there is little supervision of adolescent dating habits.

The participants also revealed that girls from poor families believed that child support grants could alleviate their plight of economic disadvantage, hence they engaged in sexual acts to bear children as a ticket for them to access the grants. The response by Thando indicated that some girls get pregnant to access child support grants:

Like me I never thought of social grant money but my mother wants my child to get the money. Some girls I know fall pregnant to get that money (child support grants), because maybe other homes they are suffering so they think that money is going to help them.

Literature supports the participants' revelations that child support grants attracted adolescents from economically disadvantaged families. Makiwane et al. (2006:3) assert that, in many social democratic countries, an increase in teenage fertility has been found to be associated with the existence of an elaborated welfare system.

Sub-theme 2 Economically advantaged school boys and rich working men

The participants admitted that they were attracted to school boys who were of good standing financially. The majority of the participants were impregnated by school-going boyfriends whose parents were financially more stable than theirs. Busi revealed that financial resources were limited at home:

At home they do not give me money. They always give me money for pocket money to school, but not every day because they don't save money, it's like they use it for drinking and smoking.

Busi then indicated how she benefitted financially from her school boyfriend:

He had some money from his parents. The parents are well up. He also told me that if I want something from him I should not be scared, I must tell him.

Thando indicated inadequate financial resources at home:

There was no money at home. I was staying with my mother. When I go to my father, he gave me very little money, but we tried to buy food.

Thando reported that she relied more on her school boyfriend's support:

He looked after me and when I needed something he went to his mom and fix it. The parents have a good job and his brother works at the mine.

Makhula openly showed that she got attracted to a boyfriend of better economic standing at school:

The other thing I was attracted to him, the way my boyfriend treated me was good and the way he dressed. The parents gave him all what he wants, like a car.

Some of the participants revealed that many of their friends preferred to rather date rich working men than school boys. Letiliswe was advised by friends not to date school boys who had no money:

They were telling me that if I date a school boy what will I benefit from it because he does not have money, he does not have cars. Some of my friends had working guys, working in the mines, with money and cars.

Makhula was also advised to rather date working men than school boys:

Yah some of the girls need money. They come to us and tell us that I am in love with someone working whilst your boyfriends are at school. Boyfriends who are at school drive a desk (no car). We do not work with 'John Walker' (a school boy without a car).

Apiwe succumbed to peer pressure to date a working man in order to get financial benefits like her friends:

Their boyfriends gave them money and I said why can't I try as well?

Angel revealed that many girls visited taverns to get financial support from men in exchange for sexual favours:

Mostly girls like to go to Tavern then boys/men buy them drinks, then after that they have sex for the drinks that the boys/men bought them. They ask you, 'Can I buy you a beer?' and you say, 'Yes.' After you have drunk it you pay back by having sex with the person.

Thobejane (2015:273) asserts that some adolescents are involved sexually with older men in relationships where gifts such as money, clothes and other goods are exchanged for sexual favours.

The empirical findings that adolescents from low socio-economic status families had more chances of early pregnancy were in line with Stapleton's (2010:18) findings that "daughters of unskilled manual workers are almost ten times more likely to become pregnant than those whose parents have professional qualifications". The researcher aptly concluded that one of the major factors that led participants to engage in sexual relationships that resulted in early pregnancy was low socio-economic status. Low socio-economic status clouded most of the participants' judgments to come up with sound sexual decisions to avert early pregnancies.

5.3.3.4 Theme 4 Technology and social media

The influences of technology and social media emerged as the participants recounted their teenage experiences. The researcher came up with two subthemes: Television, as well as cell phone usage and social networks.

Sub-theme 1 Television

Media includes every broadcasting medium such as newspapers, magazines, television, radio, billboards, direct mail, telephone, fax and internet (Parikka, 2013:2). The forms of media that featured prominently in the interviews were television and internet usage. The participants could not hide their interest in watching sexually-related television shows from time to time. Nomasonto revealed her taste for television viewing:

I liked the way they had their affairs in the television, especially stories.

Letiliswe was interested in sexually-related television channels:

I used to watch that channel 16 and pregnancy. If I see this channel I used to watch it thoroughly.

Angel's response showed the power of observation, imitation and modelling of sexual behaviours shown in television when she gave the following explanation:

As young girls watching television, there are those things that we want to try. The parents forbid them but we ask them why do my parents do not want us to do those things?

The influence of television shows and media in general on adolescents' sexual behaviours was supported by literature findings. The media is a pervasive force in all people's lives, but especially in the lives of children and adolescents (Miles, 2000:79). Parke and Clarke-Stewart (2011:303) assert that electronic media in particular have totally changed children's lives over the past few decades. It was probably because television, electronic games, internet access and cell phones were becoming unquestioningly important in most adolescents' lives from a very early age; thus, in most cases, they were more prone to be influenced by the media than adults. Thobejane's (2015:274) findings revealed that from an early age the child is inundated with abundant sexual information without the accompanying norms and values from media. Brown (2002:42) notes that the media reinforces a relatively consistent set of sexual and relationship norms that are not suitable for adolescent consumption such as premarital sexual relationships which adolescents can appropriate as the norm. Kelly (2001:15) contends that as sex-related issues receive more media exposure, some of the so-called taboo topics in traditional upbringing gradually become more acceptable. Hunter's

(2010:12) findings revealed that teenagers who watched television with a higher sexual content were more likely to become pregnant than those who did not. From the empirical findings and literature, the researcher concluded that, whilst media had positive teachings to adolescents about life issues, it also was a pervasive force in influencing female adolescents to initiate sexual acts without foreseeing the consequences of teenage pregnancy.

Sub-theme 2 Cell phone usage and Social networks

McDevitt and Ormrod (2010:407) assert that human beings of all ages seem to have a fundamental need to feel socially connected to and loved and respected by other people. The participants in this study commented that adolescents were increasingly using cell phones and social networks to connect with people of all walks of life. The participants indicated that they used cell phones for the purpose of instant messaging, calling and social network connections.

Apiwe indicated that she used the phone most of the time to connect with her boyfriend:

Maybe weekends, Saturday I do everything, then I would say, 'Mom I would like to see my friends.' She knew my friends. Then I took my phone and go and see that boy.

The participants revealed that cell phone usage made girls more accessible to boyfriends.

Busi explained the way she used her cell phone:

He gave me a phone so that he could contact me by calling, sms or whatsapp.

Letiliswe revealed that the cell phone made her accessible to her boyfriend anytime:

I met this boy, here at school, 12 March 2012. He asked for my numbers and I gave it to him. Then he came around 8 o'clock at night and call me that I am outside, then I lied to my parents that I am coming, my friend is calling me immediately. That's when I went and meet him.

The empirical findings also revealed that boyfriends often used the cell phone to express their fantasy and to maintain their relationships with their girlfriends. Intelligent said:

I just fell for it. Whenever he called and whatsapped me he said all those sweet words and I would jump and be happy.

The following participants' responses showed their elevated interests in social networks. The participants revealed that they used different forms of social networks that included Mixit, Facebook, WhatsApp and YouTube. Nomasonto revealed her engagement with social networks by saying:

During that time there was Mixit. We used to post our photos. We just take a photo with my boyfriend and other friends were also posting.

Apiwe also indicated that her boyfriend was texting and calling her most of the time:

He liked Facebook, so most of the time he used Facebook. He liked posting pictures and texting.

In the process of engaging in social networks, participants showed that they went public and thus compromised their private lives, as revealed by Angel. She said:

He used to send me his pictures and asked me to send him one of my beautiful pictures and with his Mixit would post on Facebook so that people can see.

The risk of chatting with unknown people on social networks was revealed by participants. Mpunza revealed she chatted with unknown people on social networks:

I was chatting with people; even now I do not know them.

The sexual content in the social networks was also revealed by participants. Intelligent reported:

On my phone were WhatsApp, and Facebook. We talked about everything, sexual relationships and everything.

Apiwe also revealed that she discussed sexual issues on WhatsApp. She indicated:

My friend once told me on WhatsApp that her boyfriend wanted to have sex with her but she was still a virgin.

The responses of participants showed that adolescents loved to share sexual information on social networks, especially on WhatsApp and Facebook. Stern's (2007:2) findings confirm the interests of female adolescents to use technology as a means of communication by asserting that "as society moves into the age of internet, technology becomes more important in girls' lives as a means to communicate with one another and to articulate their own identities to the world". The Philippine Human Rights Center (2014:2) explains the ways by which adolescents of today can easily initiate and maintain sexual relationships by asserting that, "accessibility of telecommunications and internet social networking has made the matching process of today's potential boyfriends and girlfriends easier than before". The use of social networks to facilitate relationships and to increase interconnectivity was supported by Barnes' (2006:2) indication that social network sites provide adolescents with suitable platforms for expressing their sexual intentions and desires as well as getting feedback from peers. The researcher came to the conclusion that adolescents found social networks a convenient way to share sexual matters with friends and to maintain their relationships with boyfriends without much parental interference. In so doing, social networks facilitated observation, imitation/modelling and reinforcement of sexual behaviours which resulted in more and more female adolescents falling pregnant.

5.3.4 Category 4: Consequences

The researcher asked the question: *In your view, how did your pregnancy affect you and other people in your life?* The empirical findings revealed that teenage pregnancy could have negative implications for the pregnant female adolescents, their families, communities and society at large. In this category, the researcher came up with three themes namely: individual, family and community.

5.3.4.1 Theme 1 Individual

After choosing the wrong path, resulting in teenage pregnancy, the participants in this study showed that they encountered many unforeseen consequences which forced them to reflect on their behaviour and in some cases to view the world differently. Although in earlier discussions the participants revealed individual consequences such as negative health outcomes, negative educational outcomes, psycho-emotional implications and adverse social outcomes associated with teenage pregnancy, the researcher found that there were other issues pertaining to the individual that needed to be highlighted. The prominent factor that participants consistently revealed was that teenage pregnancy derailed their schooling and career prospects.

Precious, for instance, believed that pregnancy had a negative impact on her schooling. She reported:

The baby affected my school life. My friends were learning and now we are far from each other. Now others are working whilst myself I am still at high school.

Mpunza felt that she could have been at university, pursuing a degree qualification by then but because of pregnancy she was still at high school. She said:

I would be by now graduating at university. I would have progressed without disturbance. I could be a model, owning my own business, driving my own car, having my own property sir.

Lebu also indicated that her dreams did not come true due to pregnancy:

It affected my career. I wanted to be a social worker.

It meant that, according to Lebu, because of pregnancy, she was unable to pursue her dream of becoming a social worker.

Similar to Lebu's loss of a career, Apiwe revealed that she lost the chance of going to a very good school due to her pregnancy. She explained:

In 2013 my mother told me she would take me to a boarding school but when she saw that I was pregnant she was very disappointed. I also wanted to finish my matric there but she said she would no longer send me there.

Many studies consistently show that teenage pregnancy and motherhood have adverse effects on educational attainment, schooling and career ambitions of pregnant adolescents. Domenico and Jones' (2007:4) and Gyan's (2013:53) findings confirmed that adolescent pregnancy can pose major challenges to school attendance and completion. Hunter (2010:127) revealed that "for many teenage mothers, pregnancy is a major event that can put a cap on educational and professional development".

The burden of child care was revealed by all participants. It was not easy for the participants to take child care responsibilities; hence they relied on family members for child care and support. Nqobile felt overwhelmed by child care responsibilities and she indicated signs of resentment of her own child. She said:

I was saying to myself why must I not kill this baby and give me space to go where I want to go?

The reactions of Nqobile towards the baby were in line with Heryan's (2012:2) findings that the adolescent mothers may develop feelings of resentment towards the infants mostly because, rather than satisfying the adolescent mothers' unrealistic hopes, the infants have needs of their own.

5.3.4.2 Theme 2 Family

Although most of the participants spoke appreciatively of the familial support they were given during and after pregnancy, teenage pregnancy impacted on their families in various ways. The researcher came up with three sub-themes as follows: financial implications, health implications and family disturbances.

Sub-theme 1 Financial implications

Many participants reported financial implications of their teenage pregnancy to the family. Gloria, for instance, indicated that her unemployed mother struggled to make ends meet. She explained:

Life was difficult because my mother was not working by that time and then she tried a lot to help me with baby food, clothes and everything.

Ngobile's mother had to come up with a plan to cater for the baby:

My mother went to the supermarket to ask the owner to give her milk and then she would pay at the end of the month.

Letiliswe commented about the struggle some grandmothers went through in trying to look after the babies:

Some grandparents are not working so they cannot afford to look after the baby, getting pension money only, it will affect them a lot.

Research findings confirm the financial burden that teenage pregnancy can bring to the pregnant adolescent's family. Whether a teenage mother chooses to terminate her pregnancy, give her baby up for adoption or keep the baby, the pregnancy and birth create financial obligations that most often fall on the adolescent mothers' family (Voydanoff & Donnelly, 1990:80; Parke & Clarke-Stewart, 2011:210).

Sub-theme 2 Health implications

Some of the participants indicated that their pregnancies had adverse physical health and emotional implications for some of the family members. Angel's father could not stand the news of his daughter's pregnancy. She responded:

When my mother told my father, my father was very much stressed; he almost had a heart attack. My mother decided to take him to hospital that's when they said he could experience heart attack any time. He stayed in hospital for months.

The participants revealed the emotional implications of teenage pregnancy to the family. Pretty's pregnancy was not good news to family members. She said:

There are many things that I went through. I disappointed almost everybody at home.

Letiliswe's pregnancy let her father down, as she indicated:

It affected my father a lot because he was always counting on me. I could see in his eyes that he was not happy at all. He was very disappointed.

Apiwe's mother could not understand how she fell pregnant because her daughter was most of the time at home. The mother felt like she did not do her best to prevent her daughter from pregnancy, hence it stressed her. Apiwe said:

I did not go out at night. Even my mother was very worried about how I got pregnant because I was always at home.

The health and emotional ramifications of teenage pregnancy cited by participants above were in line with literature findings. Newberry et al.'s (2013:18) findings revealed that whether the pregnancy is terminated, the baby is placed for adoption or the child is regarded

as an unexpected, but welcome addition, teenage pregnancy has adverse emotional effects for the family.

Sub-theme 3 Family disturbances

Most of the participants indicated that their family members experienced adjustment difficulties in accommodating their babies. Apiwe could sense how her family members were struggling to adjust:

They had to help me by force. When I was busy working they had to take care of the baby. They got used that there is someone in the home.

Letiliswe's mother was often absent from work to attend to her health conditions:

If I was facing any challenges, like I had high blood pressure, my mother had to be absent from work and take me to hospital. If I had to go to hospital immediately my uncle was always there to accompany me to hospital.

Angel revealed a very unusual situation where her parents and the parents of her boyfriend at times had to take turns to stay at the school gate to comply with the new code of conduct agreed by parents at the school. Angel explained that after one adolescent aborted a baby in the school toilets, parents agreed that parents of pregnant girls should monitor their children to avoid similar cases. The parents were asked to accompany their pregnant daughters to school and to collect them at the school gate after school. Angel reported:

The new code of conduct in the school is that when you fall pregnant there should be somebody at the school gate to watch you. I was the first one for my parents to sit at the gate and watch me each time I went home.

Boonstra's (2007:1) findings, that teenage pregnancy can have repercussions on the short term goals of the entire family, supported the notion that teenage pregnancy could cause family disturbances. The demands of a teenager's baby on the family, especially in terms of day to day care, financial and emotional support, cannot therefore be overemphasised.

5.3.4.3 Theme 3 Community

From the responses of participants, subthemes that related to the consequences of teenage pregnancy on the community emerged in the following themes: community members, financial implications to the state, gender and social inequalities, premarital sex and out of wedlock births and demographic impact.

Sub-theme 1 Community members

The responses of participants showed that people in the communities in which the participants lived were also affected. The teachers at the participants' schools were affected, as indicated by participants below: Apiwe's teachers felt let down:

The teachers who knew me better were surprised because they never thought I would be one of those girls who fall pregnant whilst at school.

Gloria's teachers could not hide their disappointment in her. She said:

My teachers were disappointed. I failed their subjects.

Nomasonto could see that her teachers no longer believed in her:

Even teachers at school started to lose their hope.

The responses of teachers to the pregnant adolescents signify that teachers were very concerned about the plight of learners and their progress. When a learner fell pregnant it could be an emotional experience for some teachers who might feel let down.

The participants also revealed that, besides teachers at schools, other community members were also affected in one way or the other. For instance, some of Apiwe's community members ran short of words upon seeing that she was now pregnant:

Many people did not say anything. They just looked at me and said 'Whao!'

Some community members could not believe it when they saw Letiliswe was pregnant:

I was not the type of girls who go to the taverns. So when people realised I was pregnant they were shocked because I was always at home.

Some community members found something to gossip about, much to the displeasure of participants. Angel said:

People started gossiping about my pregnancy at school and in the community.

Nomasonto revealed that her pregnancy was a shame to church members and her mother's friends:

People at my church and the friends of my mom were very disappointed.

The participants' assertions that teachers and community members were affected when they fell pregnant were in keeping with Vincent's (2012:35) findings that pregnant adolescents can affect school and community interactions because there is evidence of teacher discomfort not only when dealing with pregnant learners but also with sexual and relationship education.

Sub-theme 2 Financial implications to the state

The responses of participants in this study signified that teenage pregnancy had financial implications for the community and the state. Participants showed that health delivery services in particular were stretched due to pregnancy-related matters. In the process of offering health services, the state incurred expenses. Ngobile was always in hospital with her often sick pre-term child:

During exam time I wrote two subjects only, the rest of the subjects I was in hospital, he was sick.

The condition of Ngobile's baby confirmed literature findings that children born of teenage mothers have an effect on society. The babies are more likely to rely on public health care throughout their lives because they may have more chronic medical conditions that place a higher burden on the health systems of any country (The Philippine Human Rights Center, 2014:1).

Angel's father was hospitalised for quite some time because, upon receiving the news that his daughter was pregnant, he almost had a heart attack therefore he needed special attention in hospital, thus overstretching public expenditure in health delivery systems. Angel reported:

My father was very stressed; he almost had a heart attack. So he stayed in hospital for months.

On another dimension, the state incurred expenses through child support grants. The participants indicated that most adolescent mothers accessed child support grants from the government. Intelligent reported about child support grants when she said:

Even though we get them, child support grants are not enough.

Nomasonto observed and commented as follows:

Some teenagers are depending on child support grants.

Thando revealed that her mother needed the grants to look after her baby:

I never thought of child support grant but my mother wanted my child to get the money.

The financial implications of teenage pregnancy indicated by participants was in line with research findings by Culp-Ressler (2012:1) who revealed that, besides loss of earnings in tax revenues, teenage pregnancy can impact the national economy through increased public assistance payments such as child support grants, greater expenditure for public health care, foster care and criminal justice services.

Sub-theme 3 Gender and social inequalities

Many participants' responses signified that teenage pregnancy perpetuated gender and social inequalities in the community, society and the world at large. Mpunza, like many other participants, was left behind by her boyfriend due to pregnancy:

I repeated Grade 10 but my boyfriend passed and went to Grade 11.

Many participants indicated that their boyfriends did not commit themselves to the relationships for long and neither did they take responsibility for the baby. In so doing many participants faced the negative consequences of pregnancy alone whilst their boyfriends carried on with their lives as usual. As a result, the female adolescents lagged behind their male counterparts especially in educational pursuits, social mobility and economic wellbeing.

Nomasonto's boyfriend did not continue to love her as before but changed in behaviour:

He behaved differently. He had another baby with another woman. He behaved as if he did not understand me.

Apiwe revealed that boyfriends do not commit themselves:

They make you pregnant but do not take care of the baby. When I had a baby he decided to look for other girls.

Harmony also observed the behaviour of boyfriends and said:

When you fall pregnant the man runs away and that's when you also go to register for grant money.

The fact that boyfriends who were responsible for pregnancies continued with their lives with minimum interruptions as compared to their pregnant girlfriends, endorsed the strong association of teenage pregnancy and social inequalities. This is supported by Paranjotly, Broughton, Adappa and Fone (2008:2) who state that one of the effects of teenage pregnancy on society is its perpetuation of the widening gap in health and social inequalities. The empirical findings concurred with Punongbayan's (2014:1) findings that there is a causal link between teenage pregnancy and inequality. The pregnant adolescent, for example, might drop out of school due to pressure of pregnancy-related complications while their boyfriends continued to pursue their educational dreams uninterrupted.

Sub-theme 4 Premarital sex and out of wedlock births

The traditional progression from childhood to adulthood has been education, job preparation and employment, marriage and parenthood. Contemporary teenage parenthood and premarital sexual activities represent a variation in that traditional pattern (Swann, Bowe, Kosmin &

McCormick, 2003:23; Afolayan, 2004:200). According to Mollborn (2007:102), adolescent childbirth has become institutionalised, implying that there is a general acceptance of teenage pregnancy and childbearing in society. It therefore means that the social fabric of society, which includes traditional norms and practices of marriage, is being undermined.

The empirical evidence indicated that there was a prevalence of premarital sex and out of wedlock births in the communities, suggesting a variation of the traditional pattern of marriage outlined above. The responses of the participants below give testimony of the above mentioned shortcomings. Nomasonto, who fell in love with a Grade 9 boy, indicated that she was reinforced by what she observed others doing:

I loved the way my cousin had an affair with her boyfriend. They loved each other very much.

Pretty, who started dating at a very tender age, had this to say:

In that time when I was dating him he was still here at school. He was doing Grade 9 and I was doing Grade 5. I was 13 years old.

Harmony disclosed that:

Girls have made pregnancy a competition. If you do not have a child, you are not a girl. Some of the girls drop out of school but may have two or three children because they get the grant.

The empirical findings were supported by Stapleton's (2010:16) explanation that "the problem of teenage childbearing has now been technically shifted from illegitimate to teenage motherhood thereby diluting the association of childbearing with marriage". What it meant was that there was a general acceptance of adolescent childbearing in society. The stigma of illegitimacy associated with out of wedlock child births was slowly slipping away. Plummer and Wight (2011:123) assert that, according to the social constructionist theory, sexual acts, orientations and identities are constructed largely according to a society's culture at a given historical period. It meant that in this historical period a fairly permissive sexual culture was being created in society.

Sub-theme 5 Demographic impact

The prevalence of adolescent childbirths indicated in this study also confirmed literature findings that teenage pregnancy was continually increasing the world's population growth rate, thereby overstressing available resources in health and education in particular (Punongbayan, 2014:1; The Philippine Human Rights Center, 2014:1). The empirical evidence was also in accordance with The World Health Organisation report that as many as

16 million girls aged 15 to 19 years give birth each year worldwide and 95% of all those births occur in low and middle income countries (Punongbayan, 2014:1).

Besides increasing the population growth rate, adolescent childbirth feeds society with children who are often abused, neglected and, in some instances, unhealthy. The babies of adolescents often experience neglect because they are born at a time when their parents are not ready to care for them. Literature findings by Odejimi and Young (2016:20) revealed that as the teenage pregnancy rate increases, the life expectancy rate decreases due to the health complications associated with teenage pregnancy to the adolescent mother and her child.

5.3.5 Category 5: Post-pregnancy Reflections

After navigating through the path of teenage pregnancy and childbearing, the participants in this study were able to reflect on their experiences and to interpret their circumstances. The researcher came up with two themes, namely: lifetime lessons and adolescent mothers' future plans.

5.3.5.1 Theme 1 Lifetime lessons

The participants in this study revealed lifetime lessons of their experiences. The participants were asked two questions: 1. *If you were to go back to the period before pregnancy, is there anything that you wish you would have done in a different way?* 2. *What advice can you give to adolescent girls out there?* The researcher was able to come up with four subthemes as follows: adolescent sexual relationships, the meaning of adolescent motherhood, the implications of adolescent motherhood, and safe sexual practices.

Sub-theme 1 Adolescent sexual relationships

The majority of the participants revealed that most boyfriends did not mean what they said. They talked fantasy and only revealed their true colours when the reality of pregnancy was there. Because of the unreliability of boyfriends, the participants revealed that adolescent sexual relationships were normally short-lived: Nxoliswa, for instance, realised that her boyfriend just said sweet words to win her heart:

I was blinded by him, he talked sweet words. When I told him of my pregnancy, he said, 'You are on your own, do not even call me.' I cried every day. I tried to call my boyfriend again with the very same number. He said, 'Hello. Who is that?' 'It's Nxoliswa.' 'Who is Nxoliswa? I do not know Nxoliswa.' That is when I realised he had moved on.

Lebu revealed that boyfriends eventually ran away:

Boys are cowards. They run away.

Apiwe revealed that boyfriends were irresponsible:

They make you pregnant but do not take care of the baby.

Nxoliswa realised that boyfriends used money to attract girls but did not take responsibility for their needs:

When a boyfriend gives you money you feel like you owe him something.

Research provides evidence to show that pregnant adolescents are in most cases left by their boyfriends to face the challenges of pregnancy and child care alone. Chigona and Chetty's (2008:261) findings revealed that "it is the teenage mother who has to deal with social and school-based marginalisation since ... the boy father can easily dissociate himself from the pregnancy or parenting".

Sub-theme 2 The meaning of adolescent motherhood

Most participants reiterated that giving birth and raising a child as an adolescent was a mammoth task that should be avoided. Others indicated that it was not the right time for them to have a baby. Apiwe interpreted adolescent motherhood by saying:

The baby, there is so much work. I would not rush to have sex with boys. If I knew that time I would wait and tell him if he loved me, he would wait for me.

Nxoliswa revealed her reflections of raising a baby when she explained:

Well, the thing is much of a work because she can cry and you never know why she is crying because she cannot speak.

Nxoliswa realised that the time for a baby was not right. She said:

As a teenager you have not known everything and the body is not ready, so just stay that way to abstain and wait for the right man at the right time.

The difficulties of teenage pregnancy and motherhood revealed by participants were supported by Hunter's (2010:127) research findings that it is the teenage mother who often bears the brunt of pregnancy, birth and parenthood.

Sub-theme 3 The implications of adolescent peer influences

The majority of participants realised the dangers of peer influence in sexual behaviour as evidenced by the sentiments of Nxoliswa and Harmony. Nxoliswa regretted visiting her friend and said:

If I did not come to visit my friend here in the location may be things could have been different.

Harmony learnt that her going out with friends and accepting bad influences got her into trouble:

I wish I had been a girl who is better to herself more and did not go places where my friends wanted me to go with them.

The influence of peers on adolescents, as revealed in this study, linked with Adams' (2000:137) research findings that "young adolescents are more susceptible to peer pressure perhaps because of their greater concerns about social acceptance at this age".

Sub-theme 4 Safe sexual practices

Some participants realised the importance of using protection to prevent not only pregnancy but also sexually transmitted diseases. Pretty realised the need for safe sex:

If you sleep with a boyfriend you have to use protection all the time. We have to prevent sexually transmitted infections (STIs).

The lifetime lessons that participants indicated signified the importance of delaying adolescent births. This was consistent with studies that have shown that delaying adolescent births can significantly lower population growth rates, potentially generating economic and social benefits throughout the world (Mangiaterra, Pendse, McClure & Rosen (2008:1).

5.3.5.2 Theme 2 Future outlooks

Many participants in this study acknowledged that they had followed the wrong path which had led to pregnancy but had decided to think more seriously about their future and that of their babies. Apiwe accepted her situation and looked forward to caring for her child well. She said:

It was not easy but when the time went on I just accepted it and told myself that I put myself into this situation so now I have to look after my baby.

Nomasonto's teenage pregnancy experiences spurred her to learn from her mistakes and work to reach greater heights:

I told myself that one day they would be proud of me.

Nxoliswa accepted her new role as mother and promised to be a role model to her baby:

I do not chase after teenage life anymore because I think I should be a role model to her (her baby) and start doing right.

Pretty realised that she had to change her behaviour of going to taverns to avoid another pregnancy:

So I decided to stay at home. Because if you go to taverns and do those things, tomorrow you end up being pregnant again.

The new perspectives of the participants about their lives were in line with Bowman's (2013:20) research findings that "although difficult, the experiences of teenage pregnancy brought positive changes in the lives of adolescents". The participants' responses also indicated that they might have followed the wrong path of pregnancy but at the end of the day they still needed that support from society to reshape their shortcomings for their sake and the future of their babies. Literature (e.g. Van Der Hor, 2014:1) consistently shows that teenage pregnancy perpetuates a cycle of poverty. It implies that if adolescent mothers are given all the support they need, the intergenerational cycle of poverty may be minimised.

5.4 CONCLUSION

The empirical and literature findings have shown the bi-directional influences of teenage pregnancy and adolescent development. The empirical findings in this study established that physical, social, cognitive, emotional/psychological and moral developmental stages could influence female adolescents' perceptions of teenage pregnancy and their sexual behaviours. The dramatic changes in adolescents' physical development due to puberty could, for instance, influence female adolescents to have a heightened desire for people of the opposite sex. The heightened sexual urges in adolescence, according to the participants, clouded their judgments of safe sexual acts by influencing them to initiate sexual acts without protection.

The participants' responses and literature also revealed that dysfunctional families impinged on the socio-emotional development of adolescents. In so doing, some adolescents were forced into early sexual acts in their bid to escape from unfriendly home settings that were mostly created by abusive or uncaring primary caregivers, including foster parents.

Teenage pregnancy, on the other hand, impacted on the pregnant female adolescents' developmental stages. The empirical findings confirmed that the social development of pregnant adolescents could be heavily impacted upon because teenage pregnancy could create unfriendly social environments due to societal stigmatising tendencies associated with teenage pregnancy. The empirical evidence and literature findings agreed that teenage pregnancy could subject adolescents to negative psycho-emotional experiences.

The empirical study confirmed that adolescents were embedded in a number of environmental systems and influences as propounded by Bronfenbrenner's bioecological

theory. The environmental systems and influences, such as culture, globalisation, socio-economic status, media and social networks featured in this study as major forces that shaped female adolescents' perceptions of teenage pregnancy and their sexual behaviours in general. Sexual information was readily available and accessible to adolescents through technological advances in this global world. It implied that adolescents were experiencing a lot of pressure to indulge in inappropriate sexual activities. Without adequate parental guidance and monitoring, many adolescents were more vulnerable to early pregnancies than before.

The empirical studies and literature also revealed the consequences of teenage pregnancy on pregnant teenagers, their families, communities, society and the world at large. Most of the families found it difficult to meet the economic needs of the newborn babies, let alone to adjust to the demands of pregnancy and the day to day care of the baby. The communities in which participants lived had to face the economic demands associated with teenage pregnancy such as the demands for health services by the pregnant adolescents and their babies. The prevalence of teenage childbearing has also been shown to escalate the population growth rate of the world thereby putting pressure on resources in health and education in particular.

The participants were able to reflect on their experiences of teenage pregnancy. The participants revealed that school-going adolescent male partners were mostly responsible for female adolescent pregnancies. After accepting their circumstances, all participants showed that they needed to be given a second chance to enable them to realise their future aspirations. All the participants in this study went back to school after pregnancy; but their responses clearly indicated that adolescent mothers who succumbed to the pressure of pregnancy and motherhood often dropped out of school. Teenage pregnancy could therefore continue to be a social problem if left unabated. In the next chapter, the focus is on summary, conclusions and recommendations.

CHAPTER SIX

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

6.1 INTRODUCTION

The high level of teenage pregnancy in schools worldwide reflects a complicated combination of factors. Significant research worldwide has examined factors that lead to teenage pregnancy and several campaigns have attempted to uncover the causes and limit the numbers of teenage pregnancies, but little research has been allocated to the experiences and perceptions of teenage pregnancy by African female adolescents. This study therefore set out to explore the African female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga in South Africa. The study originated from the researcher's desire to make a positive contribution towards reducing the incidence of teenage pregnancy in South Africa, especially in rural, farm and semi-urban settings. The researcher believed that the exploration of the African female adolescents' experiences and perceptions of teenage pregnancy would help to direct attention towards, as well as to provide a basis for the identification of strategies and interventions, which would be of value in responding to the needs of African teenage girls. The focus of the research was on participants who experienced full term births with the knowledge of their parents/guardians and the various schools.

In this concluding chapter, the researcher focuses on the summary of the literature and key findings of the empirical study in light of the main research question, sub-research questions and aims of the study outlined in chapter one, section 1.5 and chapter four, section 4.2. The researcher highlights key findings and gives recommendations for the improvement of practice and possible policy changes. The researcher acknowledges limitations of the research and outlines final conclusions of the study.

6.2 OVERVIEW OF THE RESEARCH

6.2.1 The theoretical framework of the study

The study focused on exploring teenage pregnancy in the developmental contexts of adolescents. The researcher adopted Bronfenbrenner's bioecological model as a conceptual framework for the study. Bronfenbrenner's (1979:3) bioecological theory postulates that adolescents grow up in specific families with certain beliefs and value systems; they are part

of a community with its customs and traditions. They attend specific schools, play sports in teams and belong to recreational clubs. They live in a particular country with a specific government who makes rules and policies on, inter alia, education. All these contexts play a role in the development of the adolescent (Woolfolk, 2010:19; Ben–David, 2011:100; Matlala, 2011: 89). On the other hand, this research also takes into consideration adolescent developmental influences on teenage pregnancy and how pregnancy influences adolescent development. Bronfenbrenner’s bioecological model was thus used by the researcher to reflect the developmental and relational contexts that may influence teenage pregnancy and teenage parenthood and vice versa.

6.2.2 Literature review

The literature review in this study focused on adolescents’ experiences and perceptions of teenage pregnancy globally, taking the developmental contexts into consideration. Chapter two focused on exploring the bi-directional influences of adolescent development and teenage pregnancy. The literature findings revealed that as adolescents navigate through the stormy years of adolescence, their perceptions of teenage pregnancy and sexual behaviour change (Akella & Jordan, 2015:41). For instance, the psycho-emotional experiences that adolescents go through due to pubertal changes as well as dysfunctional home environments can force adolescents to seek love and acceptance by latching onto unreliable boyfriends (Thobejane, 2015:274; Domenico & Jones, 2007:6). In so doing, boyfriends can worsen situations by inappropriate sexual behaviour, leading to unwanted pregnancies. Literature findings also revealed that the onset of teenage pregnancy can cause many negative implications for adolescent development. As pregnancy is superimposed on top of a still developing adolescent, the additional changes of pregnancy and the demands of motherhood can have negative implications on adolescent development by interrupting the normal maturational processes (Booker, 2010:2; Oyedele, Wright & Maja, 2014:80; Herzog et al., 2007:245). Literature suggests that adolescent pregnancy can compound the adolescent’s emotional instability which in turn can lead to immense stress or depression (Chigona & Chetty, 2008:261; Max, 1993:19). In many cases pregnant adolescents face the challenges of pregnancy alone or with little support from the men responsible for their pregnancies. Hunter (2010:127) supports the above assertion by saying that “it is the young woman who faces the brunt of pregnancy, birth and parenthood”.

Chapter three focused on exploring the contributing factors and consequences of teenage pregnancy. Literature findings confirm that the broad contexts (sub-systems) of the ecological systems such as culture, globalisation, socio-economic status, media and social networks can alter the adolescents' perceptions of teenage pregnancy (Bronfenbrenner, 1979:3). Kelly (2001:1), for example, posits that sexual acts, either depicted or strongly implied in television shows, could result in adolescents' misperceptions of love. Parke and Clarke-Stewart (2011:312) concur by asserting that the media can alter perceptions of adolescents about sexual behaviour, because adolescence is an impressionable age. Adolescents may not be able to distinguish between fantasy and reality in media; hence they may model inappropriate sexual behaviours such as indulging in early sexual acts that can lead to unwanted pregnancies. Cauffman and Steinburg (2000:741) explain that pornography also fosters imitation and the impressionable adolescents may believe that sexual activity is appropriate with anyone and at any time because of this type of exposure.

The literature review in chapter three also revealed the consequences of teenage pregnancy for the adolescent, her family, community and society at large. For example, the arrival of an unwanted baby in a family can cause family members to experience adjustment difficulties such as giving responsibility to somebody in the family to look after the baby whilst the female adolescent returns to school (Newberry et al., 2013:18; Boonstra, 2007:1).

6.2.3 The empirical study

The research focused on giving 20 African female adolescents space to give retrospective, and prospective accounts of their past or future actions, experiences, feelings and thoughts (see Seale & Gobo, Gubrium & Silverman, 2004:16), with regard to teenage pregnancy. The researcher adopted a qualitative approach to this study. Qualitative researchers are interested in matters of motive and in the quality of experience undergone by those in the situation. The researcher was thus interested in the African female adolescents' motives for their sexual behaviours as well as their experience of teenage pregnancy and their future expectations. In the process of doing so, the researcher believed that he would understand the African female adolescents' constructs, meanings and interpretations of the phenomenon of teenage pregnancy better and that, in turn, would provide the basis for the identification of strategies and interventions for curbing the phenomenon.

In this phenomenological study, the researcher was concerned about the lived experiences of the participants. Mertens (2010:235) posits that the philosophical basis of phenomenology is

how participants interpret the world and life around them; hence the focus is on understanding how individuals create and understand their own life spaces. According to Groenewald (2004:1) the phenomenological paradigm focuses on conscious experiences from a first person point of view. The researcher in this study knew that African female adolescent mothers lived through the experiences of teenage pregnancy and motherhood; hence he explored how they made sense of their experiences of teenage pregnancy through individual face-to-face interviews.

The empirical study established that there was a crisis of teenage pregnancy in Mpumalanga, South Africa, because of irregular use of contraceptives or no contraceptives at all which led to unwanted and unplanned pregnancies. The study revealed that adolescent developmental phases and undesirable social contexts were primarily responsible for influencing adolescents' sexual behaviours and their perceptions of teenage pregnancy. The participants revealed that psycho-emotional instability and cognitive immaturity, for instance, clouded their judgments of safe sexual practices. On the other hand, social contexts such as African cultural values and beliefs, low socio-economic status, change in community lifestyles, hostile home settings, inaccessibility of sexual health services, media and social networks influenced the participants to engage in inappropriate sexual activities that resulted in their unwanted pregnancies. It became clear in this study that teenage pregnancy and parenthood had negative implications for the life-world of adolescents by impacting negatively on their physical health, psycho-emotional wellbeing, moral behaviour, social and school lives. The participants' responses also indicated that teenage pregnancy impacted negatively on the teenage mother, their babies, families, communities, the state and society at large. The participants, for example, revealed that teenage pregnancy had financial implications for the adolescents' families and the state, especially in terms of childcare and health services respectively.

6.3 KEY FINDINGS OF THE LITERATURE AND EMPIRICAL STUDY

Comparisons of the empirical and literature findings were discussed in detail in chapter five. This section summarises the empirical and literature findings of this study in light of the categories and themes that emerged from the participants' responses in chapter five as well as in consideration of the main research question, sub-research questions and aims of the study which were outlined in chapter one (see section 1.5) and chapter four (see section 4.2).

6.3.1 Adolescent Developmental Influences

The empirical and literature findings revealed that the developmental phases of adolescence were in part responsible for influencing adolescents' perceptions of teenage pregnancy by impacting negatively on their sexual decision making. The study revealed that the adolescents' pubertal changes (physical development), psycho-emotional experiences, social developmental dynamics, thinking patterns, moral judgments, prevention and contraceptive practices influenced their perceptions of teenage pregnancy and their sexual behaviours.

6.3.1.1 Theme 1 Changes in sexual interest

The study revealed the influences of pubertal changes on adolescents' sexual activities and experimentation. The empirical and literature findings indicated that as adolescents went through the natural phases of adolescence, they experienced a heightened desire for people of the opposite sex. The empirical evidence also showed that the participants found it difficult to embrace their sexual urges in a positive way primarily because of inadequate parental guidance and control. In so doing, the participants were influenced to engage in inappropriate sexual activities which caused their pregnancies. Intelligence's narrative represented the general reactions of most participants in response to their sexual urges:

We were in Grade 7 chatting as friends about something else then I kissed him first then later I said it was a mistake. This is when he expressed his feelings and I expressed mine.

The empirical findings revealed that as adolescents developed more interest in people of the opposite sex they often failed to distinguish between love and their sexual desires. The sentiments of Busi below who was still at primary school level when falling pregnant showed the misconceptions of most adolescents about love:

I loved him before he loved me. When I started to see him here at school I was like saying to myself why is this boy not coming to me and ask me that he loves me?

As a consequence, the majority of the participants sought love from unreliable boyfriends, whilst others forced themselves to initiate sexual activities to show what they thought was love and yet it was sexual urges. In so doing the participants became vulnerable to unplanned pregnancy. Research findings by Rutherford (2011:398) confirm that the physiological changes associated with puberty can influence the way adolescents relate to with other people and may also affect their self-perceptions, therefore relations with boys may be perceived as lifelong 'love', because these girls have a need for love and acceptance.

6.3.1.2 Theme 2 Psycho-emotional experiences

The adolescents' psycho-emotional experiences, especially feeling neglected at home, enhanced adolescents' vulnerability in looking for 'love' in the wrong places. The empirical findings established that even though pubertal changes caused psycho-emotional instability in adolescents, dysfunctional home environments could escalate it. Due to psycho-emotional instability, many participants in this study were influenced to leave their homes to seek love and acceptance from their boyfriends who later caused their unintended pregnancies. The hostile home environments as revealed in this study were mostly caused by abusive, uncaring and rejecting primary caregivers such as mothers, fathers and grandmothers. Mpunza revealed her unstable psycho-emotional state through her response:

It was very tough sir because I lived with my grandmother and aunt; because my mother died when she gave birth to me. Then my grandmother abused me. She always beat me and did silly things to me. So then I decided to go and stay with my boyfriend.

The empirical evidence reaffirmed literature findings that parental rejection or lack of warmth, affection and love leads adolescents to seek relationships outside the family to enhance their self-esteem (Domenico & Jones, 2007:6).

6.3.1.3 Theme 3 Social developmental dynamics

Social developmental dynamics such as family structure and relationships, peer relationships and school interactions could influence adolescents to engage in inappropriate sexual activities that could result in unintended pregnancy.

Sub-theme 1 Family structure and relationships

The empirical study and literature review confirmed that family structure and relationships at home could contribute to adolescent pregnancy and motherhood. Literature findings indicate that adolescents who live in relatively unstable family settings become sexually intimate to feel belongingness, thereby making them vulnerable to unwanted pregnancy (Domenico & Jones, 2007:4). The empirical evidence and literature findings established that strong family relationships and two-parent families lowered the incidence of adolescent pregnancy, probably because two parents in a family could share the responsibilities of supervising and giving guidance to their children about sexual matters in particular (see Meece & Daniels, 2008:455). The majority of the participants in this study lived in single-parent settings, mostly headed by mothers or grandmothers, apparently as a result of father absence. The empirical study established that there was no strong disapproval of adolescent sexual

activities in these families. The lack of parental support and monitoring revealed in this study therefore exposed most adolescents to engage in risky sexual behaviours that resulted in unwanted pregnancies.

Sub-theme 2 School interactions and relationships

The study demonstrated that school interactions and relationships could have negative implications for adolescent sexual behaviours and teenage pregnancy. The empirical study revealed that most adolescent pregnancies were caused by school-going male adolescents. The empirical findings ran counter to the conventional view that most teenage pregnancies were caused by working men. Most of the participants in this study started their relationships at school. The study also revealed that school settings provided adolescents with enough space to initiate sexual relationships, apparently because learners spent most of their time at school. Literature confirms that “schools have become primary spaces for adolescents to meet and socialise with their peers. This is where they learn to relate to the opposite sex and often have their first romantic and sexual experiences” (UNICEF, 2014:30). The impact of school interactions was also confirmed by Meece and Daniels’s (2008: 8) assertion that by the time young people graduate from high school they will have spent more than 10 000 hours in school; thus school interactions are quite influential in the social development of adolescents.

Sub-theme 3 Peer influences

School peer relations were also responsible for adolescents’ inappropriate sexual behaviours. The study revealed that most of the peer influences on the initiation of sexual activities happened at both primary and high schools. Nqobilie indicated how she succumbed to peer pressure at school:

I was still young and did not want to have a boyfriend. So because of a friend eish! I was doing Grade 7 and I was having a friend, so that friend had a boyfriend and also wanted me to have a boyfriend. I was refusing but in November I decided to have a boyfriend in class.

The empirical evidence above confirmed Akella and Jordan’s (2015:41) findings “that the individual’s immediate social circle can generate behavioural models, which become a source of imitating behaviour”. Nqobile’s friend was therefore her major source for imitating inappropriate sexual behaviours. According to Akella and Jordan’s (2015:41) findings, social groups such as peers in schools communicate attitudes, views and values about sexual matters that an individual can adopt and inculcate. The researcher concluded that adolescent sexual behaviours were socially shaped.

6.3.1.4 Theme 4 Adolescent thinking patterns and moral judgments

Cognitive immaturity of adolescents and their still developing moral judgments were in part responsible for the adolescents' unintended pregnancies in this study. Most of the adolescents in this study did not see the consequences of their sexual acts because of cognitive immaturity. The demographic profile of the participants showed that the majority of the participants fell pregnant in Grades 9 and 10 and between 15 and 17 years of age. It showed that most of the participants were still cognitively too immature to perceive the consequences of their sexual acts, such as unwanted pregnancies and their future plans. Pretty represented the thinking patterns of most adolescents:

It just happened because I did not even plan it. I did not even know what was happening because I was still a child. So I did not even make a decision, I was not thinking well.

The participants' lack of consciousness about consequences of sexual intimacy or pregnancy because of their inability to make proper sexual decisions were consistent with Sigelman and Rider's (2012:40) revelations that cognitive immaturity, failure to anticipate consequences, and lack of knowledge may all be factors that influence sexual decision making of adolescent females. Literature also confirms that the immature thought patterns of adolescents make them unable to tolerate delaying gratification or to think abstractly, especially in terms of future consequences (Devito, 2010:25).

Cognitive immaturity also affected many participants' ability to distinguish between love and sexual desires. Many participants believed that true affection for their boyfriends could only be shown by engaging in sexual acts and yet sexual acts did not necessarily indicate love. Due to the mistaken belief that love could only be shown by engaging in sexual acts, most of the participants succumbed to their boyfriends' demands for sexual intimacy which later resulted in their unwanted pregnancies. Bowman (2013:1) posits that there are other ways of showing affection other than engaging in sexual activities, because sexual acts do not necessarily equal love, neither does love equal sexual acts.

The study established that most adolescents failed to come up with sound moral judgments pertaining to their sexual choices. The participants' moral misjudgements were mostly influenced by cognitive immaturity, psycho-emotional instability, and caused by unfriendly home settings and peer pressure. Apiwe's explanation of how she made her decision to start a romantic relationship was indicative of the extent to which peer influences, for instance, could affect adolescent moral judgments:

I told myself that many girls are really in love. Why not me? Why not I try and see what makes them happy?

Gyan's (2013:58) findings revealed that peer influences contribute greatly to teenagers' involvement in early sex. Many adolescents may thus base their moral decisions on what is expected by peers. Literature findings endorse that adolescents' failure to come up with sound moral judgment is often caused by immaturity. Bednar and Fisher's (2003:607) findings revealed that adolescents are psychologically less mature than adults, and this immaturity impairs their judgments and decision making. Romer's (2010:263) research findings revealed that most adolescent sexual behaviours are characterised by impulsivity whereby they often act without thinking. Adolescents are also impatient, especially when they are given a choice between an immediate small reward versus a longer but delayed reward (Romer, 2010:263). It implied that many adolescents found it difficult to delay indulging in sexual acts for long term benefits such as uninterrupted schooling without falling pregnant.

6.3.1.5 Theme 5 Pregnancy prevention and contraceptive practices

The study established the inadequacies of adolescents in pregnancy prevention and contraceptive practices. There was evidence of underutilisation of health care services by participants in this study, influenced by adolescents' thoughts and feelings about these facilities. For instance, the majority of the participants revealed that they did not access contraceptives from the clinics because they were afraid the nurses would judge them, seeing that they were young, so they continued to engage in unprotected sexual activities that caused their pregnancies. Literature findings in *Pediatrics* (2007:1135) confirm that if adolescents perceive obstacles to obtaining contraception and condoms they are more likely to engage in unprotected sexual activities, causing unwanted pregnancies.

Adolescents in general are inconsistent contraceptive users. The participants in this study engaged in sexual activities without protection, hence they became vulnerable to early pregnancy. The empirical findings supported literature findings by Van Der Hor (2014:1) that most adolescents are caught in the act of the moment by engaging in unplanned sexual encounters. The empirical findings corroborated the findings by Odejimi and Bellingham-Young (2016:12) who revealed that underutilisation of healthcare services, particularly sexual health services, among female adolescents has been associated with high teenage pregnancy in Africa because the adolescents in most cases engage in unprotected sexual acts.

The empirical study established that there was a high level of unprotected sexual activities by adolescents in farm, rural and semi-urban settings of Belfast, Mpumalanga.

6.3.2 The Effects of Teenage Pregnancy on the Life World of Adolescents

Teenage pregnancy had negative implications for adolescent development. The literature and empirical studies confirmed that teenage pregnancy and motherhood could impact negatively on the physical, psycho-emotional, social, cognitive and moral development of the adolescent.

6.3.2.1 Health and physical wellbeing of adolescent mother and child

The empirical evidence and literature findings confirmed that teenage pregnancy had adverse health and physical implications for both the adolescent mother and her child. Thando's assertion confirmed the general trend experienced by pregnant adolescents in this study about their health conditions:

My feet, my hands were sore and my blood pressure shot up. My life was not easy, yoh! It was bad. My body was not right. I was dizzy, almost fainting.

The high blood pressure indicated by some of the participants in this study could have been symptoms of pre-eclampsia, a disease that is also commonly associated with teenage pregnancies (Nandi et al., 2014:673). Complications mentioned in the literature about teenage pregnancy include premature labour, low birth weight, increased neonatal mortality, iron deficiency anemia, toxemia, prolonged labour, feropelvic disproportion, vaginal infection and vaginal lacerations all of which interrupt normal physical development (Chen et al., 2007:368; Allen & Dowling, 1998:22).

One participant in this study, Nqobile, experienced premature delivery possibly because she became pregnant at the very young age of 14 years. The premature delivery by Nqobile signified that teenage pregnancy had adverse physical health implications for the mother as well as the child. Literature findings by Odejimi and Bellingham-Young (2016:12) revealed that "children born of teenage mothers are often unhealthy as they are more likely to be low birth weight or premature babies".

6.3.2.2 Theme 2 Social life

Teenage pregnancy and motherhood could adversely affect the adolescents' normal maturational processes, especially social development. The study revealed that pregnancy

created unfriendly and unaccepting social environments for the pregnant adolescents. The participants in this study faced unfavourable environments at their schools where learners often laughed at them; at home where some family members struggled to accept their pregnancy; and in their communities where community members regularly gossiped about them. The study therefore established that teenage pregnancy promoted social exclusion because negative stereotypes still existed in many communities. The empirical findings were in accordance with Domenico and Jones' (2007:6) findings that society tends to stereotype all adolescent mothers in an unfavourable manner.

The research revealed that teenage pregnancy affected the social development of the teenage mother by causing role conflicts. The empirical and literature findings indicated that adolescent mothers experienced a sudden role transition because pregnancy and motherhood thrust the adolescent mother into the world of adult responsibilities where they often could not cope (Oyedele et al., 2014:81). Teenage pregnancy represented a variation in the traditional pattern of progression from childhood and adolescence to adulthood. The adolescent mother was torn between two competing roles, that of learner and parent (Langile, 2007:1601; Mangiaterra et al., 2008:1). The study revealed that most adolescent mothers needed the assistance of adults to raise their children, thereby pushing them into a more dependent position, contrary to the adolescents' quest for independence. The researcher concluded that teenage pregnancy interrupted the normal social development of the adolescent mother by causing social exclusion and role confusion.

6.3.2.3 Theme 3 Psycho-emotional wellbeing

Teenage pregnancy had adverse psycho-emotional implications for the female adolescent both before and after pregnancy. The empirical study established that all pregnancies were unwanted so it was very stressful for the participants to come to terms with their pregnant situation and also to meet the demands of motherhood. The words of Letiliswe represented the general psycho-emotional experiences of the participants in this study:

It was a shock. I was not expecting to be pregnant at the age of 16. I was so scared. I did not know what to do.

Max (1993:19) confirms the adverse psycho-emotional experiences of pregnant adolescents by asserting that events that are considered to be occurring out of synchrony, either earlier or later than expected are more stressful than developmental changes; hence the unexpected

teenage pregnancy may be the cause of major adjustment difficulties for the adolescent mother.

6.3.2.4 Theme 4 School life

The study confirmed that adolescent mothers experienced interrupted school lives that adversely affected their school achievements and future plans. Mpunza's revelations represented the negative educational outcomes of teenage pregnancy:

I discontinued with school and then began again. I was thinking of the books and on the other hand, the child. I did not have even enough time to study because I needed to breastfeed the child; I needed to study so I did not have enough time.

The challenges that adolescent mothers faced at school was an indication of why adolescent mothers drop out of school. Thobejane (2015:274) reports that teenage pregnancy compels the teenage mother to drop out of school if she is not properly supported. The participants in this study at least got support to continue with schooling.

6.3.2.5 Theme 5 The moral behaviour of teenage mothers and their children

Participants in this study revealed that they found it difficult to refrain from sexual activities once they fell pregnant. Angel's sentiments revealed the feelings of all participants that it was no longer easy to abstain. She said:

It is not easy sir because when you start having sex when you are young it is not easy to stop.

The sexual behaviours of participants after falling pregnant was in line with literature findings that suggest that puberty when coupled with pregnancy seems to promote immorality by loosening restraints on, for instance, inappropriate sexual behaviour, often resulting in repeated pregnancies (McDevitt & Ormrod, 2010:162). Literature findings revealed that the children of teenagers often engage in anti-social behaviours because of inadequate parental care by the still developing teenage mothers (Mkhwanazi, 2010:347; McDevitt & Ormrod, 2010:162). It implies that teenage pregnancy does not only affect the moral development of the pregnant adolescents, but also their peers who imitate them, and eventually the behaviours of their own children. The researcher concluded that teenage pregnancy could impact negatively on the moral development of teenage mothers, other female adolescents and their children.

6.3.3 Contributing Factors and Causes

Literature findings by Bronfenbrenner (1979:4) revealed that the development of individuals takes place in a variety of contexts or systems that extend from the immediate physical environment of the individual to society in general. The influences of the broader contexts in which adolescents found themselves, such as socio-cultural influences, changes in community lifestyles, socio-economic factors and social media were mentioned in this study.

6.3.3.1 Theme 1 Socio-cultural influences

African cultural contexts indirectly influenced adolescents' sexual behaviours and childbearing. The participants demonstrated that they were influenced by certain sexual values, norms, beliefs and practices inherent in their African culture. The socio-cultural influences that were established in this study were familial support and kin-network patterns as well as cultural values and beliefs.

Sub-theme 1 Familial support and kin-network patterns

The researcher established from the study that familial support and strong kin-network patterns in African cultures influenced female adolescents' perceptions of teenage pregnancy and childbearing. It was clear from the literature and empirical findings that there were strong kin-network structures in African cultures that helped adolescent mothers in raising their children, thereby indirectly influencing them to bear children whilst they continued with school. Busi's excerpt revealed the general trend of familial support in African cultures:

I told my parents that I was pregnant. They told me that I must not abort the baby. I must keep it, they will support me. They did everything for my baby, and then they told me that I must go back to school. They stayed with my baby but the mother of my boyfriend took the baby because my mother was drinking too much.

Literature findings confirm the strong kinship networks in African cultures. Slonim's (1991:19) findings reveal that collectivist African cultures have strong roots in their African heritage, the African heritage of kinship bonds and role flexibility. Because of strong kinship bonds, African female adolescents may find nothing wrong in leaving their babies in the care of older members such as grandmothers and aunts, thus it promotes adolescent childbearing by lessening the burden of child care. Hunter's (2010:4) findings confirm that the availability of parental or grandparental support permits girls to attend school after giving birth. The extra parental support in child care was thus a critical factor that influenced most African female adolescents to ignore the consequences associated with teenage childbearing.

The strong kin-network patterns of African cultures supported the South African policy that allowed pregnant adolescents to remain in school after pregnancy. The participants in this study left their children in the care of adults, particularly grandmothers, whilst they continued with school; hence there was not much of a deterrent for adolescents to avert pregnancy. The empirical findings were in line with Oyedele, Wright and Maja's (2014:84) argument that "the liberal policy in South Africa that allows pregnant girls to remain in school post-pregnancy protects teenage mothers' educational attainment but indirectly influences pregnancy rates".

Sub-theme 2 Cultural values and beliefs

African cultural values, beliefs and customary practices such as their communication patterns about sexual issues, gender inequality in sexual negotiations, initiation schooling and values of fertility influenced adolescents' sexual behaviours and their perceptions of teenage pregnancy.

The inadequacy of African families to communicate about sexual matters with their children emerged in this study. The participants revealed that they instead got information from other sources such as peers and the internet. Nomasonto's words represented the general trend of sexual communication by African parents with their children: *Parents do not want to talk about sex but they are not aware that teenagers need the truth*. From the literature review it emerged that African parents spend little time talking with their children about sex and sexuality and to discuss the use of contraception (Thobejane, 2015:274). African cultures, according to Plummer and Wight (2011:129; Kelly, 2001:6), see sex as a taboo topic for discussion and mostly view school based sex education as unacceptable. In so doing, misinformation and myths about sex are often shared amongst adolescents and their peers. The researcher concluded that most African adolescents engaged in sexual encounters with inadequate contraceptive information and knowledge about safe sexual practices imparted to them by their parents, hence they became vulnerable to unwanted pregnancies.

Initiation schooling can also influence adolescents' sexual behaviours. The empirical evidence suggested that initiation schooling, a customary practice in South Africa, could encourage young people to engage in early sexual encounters. Angel's words below acknowledged the feelings of most participants about initiation schooling:

I started dating in Grade 8. He was my first boyfriend. Then in Grade 9 he went to School Mountain (initiation school). Then there was this peer pressure with friends who told me, 'If your boy comes from the school mountain, you need to sleep with him. You see, peer pressure with friends.

Similar findings in respect of initiation practices were reported by Thobejane (2015:274) who asserts that in African cultures it is believed that a boy must go to initiation school to be given lessons about manhood, but these lessons may have the unintended purpose of leading them into early sexual activities. The researcher established that the boys from initiation schools were in most cases tempted to prove their manhood by engaging in sexual activities. On the other hand, upon seeing the boys from initiation school, girls might be tempted to establish romantic relationships with them but without seeing the long term consequences of teenage pregnancies.

The value of fertility in African cultures influenced adolescent childbearing. The participants in this study revealed that abortion was not the best option for their unwanted pregnancies; therefore, they decided to continue with their pregnancies to full term. The empirical findings were in line with literature findings that most African cultures strongly believe and value the fact that children continue the family line, hence giving birth may give African female adolescents an elevated status, especially among other peers (Hunter, 2010:20). The participants in this study showed their elevated status by revealing that after giving birth they were no longer scared to visit clinics for sexual health services because the nurses were now treating them as adults.

Although all the participants in this study decided to continue with their pregnancies to full term, they revealed that their pregnancies were not intentional but just happened. The participants also revealed that they delayed pre-natal care mostly because it took some time before they came to terms with their unplanned pregnancies. The empirical findings refuted Hunter's (2010:17) research findings that "in Limpopo, South Africa, it is culturally wrong for a woman to reach the age of 21 without a child. It does not matter whether you are married or not, you have to have a child to prove you are not barren".

The empirical findings demonstrated African male dominance in sexual negotiation and pregnancy prevention. Letliswe, like many other participants, did not want to make her boyfriend angry by refusing to have sex. She reported:

Each time he said he wanted to sleep with me I used to refuse because I was not ready. When I refused he got very angry.

The majority of participants revealed that they trusted their boyfriends for pregnancy prevention but the boyfriends proved to be inconsistent condom users. In so doing, all the participants in this study engaged in unprotected sexual activities that resulted in unwanted pregnancies. The empirical findings were in line with literature findings that gender inequalities in most African cultures deny the female adolescents the opportunity to express their desire to insist on condom use or refuse to have sex (Hunter, 2010:13; Iliffe, 2005:264).

6.3.3.2 Changes in community lifestyles

The role of global influences on adolescent sexual behaviours and teenage pregnancy was revealed in this study. The study established that South Africa and its communities could not ignore global influences, taking note of the changes in community lifestyles. Globalisation represents the triumph of modernisation which is characterised by homogenisation of values around the principles of capitalism and democracy and technology that promotes a multiplicity of interconnections (Eitzen & Zinn, 2006:1; Held, 2004:15; Derne, 2008:19). The following changes in community lifestyles emerged in this study: internet usage and cyberspace access, adolescent freedom, consumer lifestyles and labour migration. Despite the fact that most of the participants in this study came from farm, rural and semi-urban environments, global influences could be seen from their responses. The literature and empirical findings endorsed that adolescents responded to the changes in community lifestyles with both positive and negative consequences pertaining to their sexual behaviours.

Sub-theme 1 Adolescent freedom

The free time activities of the participants in this study signified female emancipation. The participants in this study showed that they were given too much freedom by their parents or guardians to come and go in the communities as they wished. In most cases the adolescents went out to partake in alcohol abuse in the taverns after which they engaged in sexual activities. Angel's description of her free time activities represented the general behaviour of most adolescents in this study:

Drinking alcohol, go out with friends. Go to party, house party, where we would drink alcohol, come home in the morning the following day. My parents used to beat me but I did not see the reason they beat me, I would go back again.

The results corroborated the findings by Kanku and Mah (2010:563) which revealed that teenagers like to spend time in taverns, drinking alcohol, which impairs judgment. The participants openly revealed that alcohol was in most cases purchased for them by men in

exchange for sex. The empirical findings were in line with literature findings that there is a strong correlation between teenage pregnancy and alcohol abuse in most developing countries (Nandi et al., 2014:671). The discussed behaviour revealed that adolescents in Belfast, Mpumalanga engaged in premarital sex because of too much freedom and alcohol abuse. As a result, teenage pregnancy rates remained high. Plummer and Wright's (2011:129) findings support the notion that adolescents often go to parties and clubs without adult supervision. The increased autonomy of the adolescents with immature thought patterns provides opportunities for inappropriate sexual behaviour (Plummer & Wright, 2011:129).

Increased autonomy of the participants also led them to initiate sexual acts too early. The participants revealed that they started to engage in sexual activities at a very young age. The early initiation of sexual acts by participants is supported by findings from Natividad (2014:1) that early childbearing is a consequence of early intercourse. The behaviour of the participants to start sexual acts at a very young age signified that many adolescents were deviating from the traditional patterns of sexual behaviour where young people were expected to wait until the appropriate time of marriage before they engaged in sexual activities. The empirical findings above were in accordance with McLeod's (2009:210) assertion that it is a universal phenomenon that, where people have lost certain traditional moral codes and measures of control, there is an increase in premarital and extramarital sexual relations and illegitimate births.

Sub-theme 2 Internet usage and cyberspace access

Besides female emancipation, the study revealed that internet usage and cyberspace access influenced female adolescents' perceptions of teenage pregnancy and their sexual behaviours in general. The study established that internet usage was the major media source from which adolescents gathered sexual information which could influence their sexual behaviours. The empirical evidence and literature findings suggested that internet usage and cyberspace access connected adolescents to the rest of the world thereby enabling them to access sexual information including pornographic visuals from known and unknown sources. From the literature review it emerged that, as digital and online technologies are acquired and used by people everywhere, social shaping and consequences are experienced such as the increased exploration of sexual activities by adolescents (Lemish, 2010:190). The study established that increased exploration of sexual activities by adolescents led them to engage in inappropriate sexual activities that often resulted in unintended pregnancies.

Sub-theme 3 Consumer lifestyles

Global influences on adolescent consumer lifestyles were also found by the researcher to impact negatively on adolescents' sexual behaviours and teenage pregnancy. Literature findings by McLachlan (2001:10) revealed that "everyone wants a television set, motor car, a cellphone and a hamburger in this modern world". It meant that global influences meant common interests and consumer behaviours worldwide. Most people would do anything to have computers, cell phones, good clothing, and decent accommodation in line with global influences. The participants in this study also revealed that many girls were attracted to rich older men who could provide them with material needs such as money and clothing but in exchange for sexual favours. Letliswe revealed the lifestyles of many girls with rich older boyfriends:

My friend told me that she is dating older men with Range Rovers, Fortuners and Jeeps. The older men are called 'Blessers' nowadays.

6.3.3.3 Theme 3 Socio-economic factors

Another contributing factor to teenage pregnancy that emerged from this study was the negative influences of low socio-economic status on adolescents' perceptions of teenage pregnancy and their sexual behaviours.

The empirical and literature findings established the influence of child support grants on teenage pregnancy. There was evidence in this study that child support grants encouraged many adolescents of low socio-economic status to bear children in order to access the grants. The snippet of Thando's narrative indicated the views of many participants:

Some girls I know fall pregnant to get that money (child support grants), because maybe other homes they are suffering so they think that money is going to help them.

Literature findings (e.g. Akella & Jordan, 2015:42) revealed that child support grants may appear like a pleasant outcome of pregnancy, particularly to adolescents of low socio-economic status, who may view the grants as opportunities to alleviate their financial challenges.

The empirical study also revealed that economically advantaged school boys as well as working men attracted many adolescent girls from disadvantaged families to engage in sexual relations. Similar findings by Thobejane (2015:273) revealed that some adolescents are involved sexually with older men in relationships where gifts such as money, clothes and other goods are exchanged for sexual favours. It meant that non-sexual needs such as the

need for money and clothes could influence economically disadvantaged female adolescents to establish romantic relationships with rich boyfriends, but without foreseeing the impending risk of teenage pregnancy.

The empirical findings revealed that parents or caregivers of low socio-economic status families were often hostile and rejecting parents because of financial stress. The female adolescents from such families might be forced to seek comfort or acceptance from boyfriends who in turn were responsible for unintended pregnancies. Pretty summarised the behaviour of some of the participants who experienced rejecting and hostile parents:

I needed someone who would love me. So I decided to stay outside the yard with my friends, something like that, doing things that I did not like for myself.

Similar findings by Bergin and Bergin (2012:402) confirm the reactions of participants above by explaining that an adolescent, dissatisfied with her life and feeling overwhelmed by strong needs, takes action to alleviate the uncomfortable state like getting into a relationship with a rich boyfriend. Owens' (2002:28) research established that when an adolescent is overwhelmed by circumstances a blind impulsive action such as establishing a romantic relationship may be the end result but without due regard for long term consequences like unintended pregnancies.

The economically disadvantaged participants in this study became mothers at an early age and this supported the notion that growing up with adversity appeared to be coupled with accelerated maturation, which may influence adolescents to assume a maternal role at an early age (Stapleton, 2010:23). The study therefore established that female adolescents from low socioeconomic families might view early childbearing more positively than those of higher socio-economic standing (Minujin & Nandy, 2012:69).

6.3.3.4 Theme 4 Technology and Social media

The empirical and literature findings established that technology and social media influenced adolescents' inappropriate sexual behaviours which often resulted in unintended pregnancies.

The empirical evidence showed the power of television in influencing adolescents' sexual behaviours. Angel's response signified the power of observation, imitation and modeling of sexual behaviours shown on television when she gave the following explanation:

As young girls watching television, there are those things that we want to try. The parents forbid them but we ask them, 'Why do my parents do not want us to do those things?'

The influence of television shows and media in general on adolescents' sexual behaviours was in line with literature findings by Thobejane (2015:274) which reveal that from an early age young people are inundated with abundant sexual information without the accompanying norms and values from media. Similarly, Kelly's (2001:15) research findings established that intercourse is either depicted or implied in television shows and by so doing the research findings by Parke and Clarke-Stewart (2011:312) revealed that such television shows alter adolescents' perceptions of sexual behaviour. Brown (2002:42) concurs by asserting that the media reinforces a relatively consistent set of sexual and relationship norms that are not suitable for adolescent consumption such as premarital sexual relationships which adolescents can appropriate as the norm. Kelly (2001:15) contends that as sex related issues receive more media exposure, some of the so-called taboo topics in traditional upbringing gradually become more acceptable. It meant that the impressionable adolescents were more prone to the influence of media to indulge in inappropriate sexual behaviours than adults.

The role of digital media such as Facebook, YouTube and Twitter in influencing adolescents' sexual behaviours was revealed in this study. These communication media interconnected adolescents to the rest of the world; hence they were exposed to diverse sexual influences that could shape their perceptions of teenage pregnancy and their sexual behaviours. The anonymity of social networks, for instance, enabled the impressionable adolescents to discuss sexual matters with anyone without parental censorship. In so doing, most adolescents appropriated sexual behaviours that could result in unintended pregnancies. Mpunza, like many other participants, indicated that she chatted with unknown people on social networks:

I was chatting with people; even now I do not know them. Even in internet people Google about stupid things.

Through social networks, adolescents were therefore able to access sexual information and values which they could adopt as their own but without foreseeing the consequences.

Literature findings point out that the anonymity of the internet provides opportunities for unstable teenagers to indulge in sexual exploration unchecked by adults (Barnes, 2006:2). Stern's (2007:2) findings revealed the interests of female adolescents to use technology as a means of communication by asserting that "as society moves into the age of internet, technology becomes more important in girls' lives as a means to communicate with one another and to articulate their own identities in the world". The researcher concluded that technology and social media influenced the impressionable adolescents to indulge in sexual acts that could result in unwanted pregnancies. The adolescent of today was able to interact

with people in the global world online. This meant that the outside world was no longer far-fetched to the female adolescent because of technological innovations such as the internet and social networks that connected them to the rest of the world.

6.3.4 Consequences

The study revealed that teenage pregnancy had negative implications for the pregnant adolescent, her family, community and society at large.

6.3.4.1 Theme 1 Individual

The physical, psycho-emotional and social implications of teenage pregnancy for the pregnant teenager were highlighted in section 6.3.1, as well as in more detail in chapter five (section 5.3.1). In addition to the implications highlighted above, teenage pregnancy derailed career ambitions of adolescent mothers because it interrupted schooling. Precious's narrative represented the sentiments of many participants in this study:

The baby affected my school life. My friends were learning and now we are far from each other. Now others are working whilst myself I am still at high school.

The literature and empirical findings revealed that teenage pregnancy disturbed the smooth transition from adolescence to adulthood by thrusting the adolescent mothers into maternal roles they could not cope with. The participants in this study revealed that they were not ready psycho-emotionally to take on parental roles. According to the participants, they could not cope with maternal roles without adult support and financial assistance. The researcher established that, as a consequence of their inability to cope with maternal roles, pregnancy forced the participants into more dependent positions by making them rely heavily on adults for child rearing. In so doing pregnancy disturbed the participants' quest for independence from parents, an important part of the maturing process in the adolescent phase (Rutherford, 2011:83).

In relation to the inability of female adolescents to take up maternal roles, it also emerged from the empirical and literature findings that teenage pregnancy caused a sudden role transition whereby the adolescent mother was caught between two competing roles, that of adolescence and motherhood, which proved to be an insurmountable task (Oyedele et al., 2014:80). Devito's (2010:25) findings revealed that adolescent mothers are faced with a dual challenge of progressing through the stages of adolescence and at the same time adapting to

the maternal role. Nqobile's sentiments illustrated how difficult it was for participants to cope with motherhood and schooling:

I had to pump milk for the baby. My mother did not have enough money to buy milk. Sometimes my breasts did not have enough milk. Then sometimes I left a small bottle. But when at school I was thinking maybe the milk is finished and the baby is crying. I did not focus well at school.

The literature and the empirical findings indicated that teenage pregnancy had the potential to restrict the adolescents' personal, career and social transition to adulthood (Jennifer, Smith, Rachel, & Jennifer, 2012:181). The empirical findings corroborated Afolayan's (2004:129) findings that premature sexualisation and motherhood rob the adolescent mothers of the joys and benefits associated with adolescence. According to Erikson's psychosocial theory, such adolescents face a crisis of identity role confusion. The crisis is caused by the adolescents' failure to progress smoothly through the psychosocial stages of development due to pregnancy. Vincent (2012:57), in confirmation of the empirical evidence, asserts that even with support, juggling the dual roles of mother and student present additional challenges to adolescent mothers. The researcher concluded that teenage pregnancy disturbed the normal maturation process of adolescence.

6.3.4.2 Theme 2 Family

From the literature and empirical findings, the researcher established that teenage pregnancy could have negative financial, social and health implications for the female adolescent's family members. The empirical findings revealed that teenage pregnancy increased economic and social dependency on the adolescent mother's family. Letliswe's explanation represented the common view of participants about the financial obligations that adolescent childbearing could bring to the family:

Some grandparents are not working so they cannot afford to look after the baby, getting pension money only, it will affect them a lot.

The empirical evidence was in line with Voydanoff and Donnelly's (1990:80) findings that "whether a teenage mother chooses to terminate her pregnancy, give her baby up for adoption or keep the baby, the pregnancy and birth create financial obligations that most often fall on the adolescent mothers' family".

It emerged in this study that the family members of teenage mothers often experienced adjustment difficulties catering for the pregnant teenagers and their newborn babies. Apiwe,

like many participants in this study, could sense how her family members were struggling to adjust:

They had to help me by force. When I was busy working they had to take care of the baby. They got used that there is someone in the home.

Letliswe reported that her mother was often absent from work to attend to her health conditions:

If I was facing any challenges, like I had high blood pressure, my mother had to be absent from work and take me to hospital. If I had to go to hospital immediately my uncle was always there to accompany me to hospital.

Literature findings by Boonstra (2007:1) confirm that teenage pregnancy can have repercussions on the short term goals of the entire family because family members may be forced to adjust their plans in order to attend to the pregnant mother and/or newborn baby.

Teenage pregnancy could also have negative health and emotional implications for family members. The literature findings by Kail and Cavanaugh (2007:270) confirm that “teenage pregnancy is one of those life events that few families anticipate and the effects of adolescent pregnancy can reach well beyond the young mother’s life, impacting the lives of other family members in the process”. The empirical study established that pregnancy could be so traumatic to the parents of the pregnant teenager that it could cause serious health implications. One participant’s father almost had a heart attack upon receiving the unexpected confirmation from the clinic that his daughter was pregnant. Angel’s father could not stand the news of his daughter’s pregnancy:

When my mother told my father, my father was very much stressed; he almost had a heart attack. My mother decided to take him to hospital, that’s when they said he could experience heart attack any time. He stayed in hospital for months.

Although most of the participants in this study indicated that their parents received the news of their pregnancy with shock and disbelief, Angel’s narrative above was an indication that teenage pregnancy had the potential of causing serious and devastating health consequences for family members.

6.3.4.3 Theme 3 Community, the state and society at large

Teenage pregnancy impacted negatively on communities, the state and society at large. The negative outcomes of teenage pregnancy to communities revealed in this study include: gender and social inequalities, breakdown of cultural traditions, economic and social dependency on the state and demographic impact.

Sub-theme 1 Gender and social inequalities

The researcher established that teenage pregnancy caused gender and social inequalities in communities mostly by impacting negatively on the career prospects of pregnant teenagers. Mpunza's narrative summarised what happened to the majority of the participants:

I repeated Grade 10 but my boyfriend passed and went to Grade 11.

The finding was in line with other studies that showed that there is a causal link between teenage pregnancy and gender inequality in society (Punongbayan, 2014:1). In some instances, the adolescent mother may drop out of school thereby subjecting herself to poverty or less earning power compared to her boyfriend (Van Der Hor, 2014:1). Literature findings revealed that "when pregnant adolescents drop out of school, it undermines government's efforts towards ensuring the millennium goal of education for all" (The National Academies Press, 1995:1).

According to the empirical study, teenage pregnancy also promoted gender and social inequalities by the irresponsible behaviours of the boyfriends who caused their pregnancies. Most boyfriends in this study easily dissociated themselves from the pregnancies either by refusing to own up or by starting relationships with other girls. The participants indicated that most of the boyfriends were not responsible for looking after their children thereby leaving them and their families to struggle alone. Nomasonto's words represented the general view of participants in terms of their circumstances as compared to those of their boyfriends:

He behaved differently. He had another baby with another woman. He behaved as if he did not understand me.

The empirical findings were in line with the research findings by Bonell (2004:266) that adolescent childbearing is often unsupported by men responsible for the pregnancies. It meant that pregnancy posed a lot of disadvantages for the adolescent mother in comparison to the boys and men responsible for their pregnancies; hence it promoted gender and social inequalities by restricting the female adolescents' chances of success.

Sub-theme 2 Breakdown of cultural traditions

The prevalence of out of wedlock births established in this study signified a shift in the traditional pattern of marriage. In other words, premarital sexual acts and adolescent child births were undermining the institution of marriage in communities. The study indicated that the stigma of illegitimate children was slowly waning away in the communities as shown by the prevalence of out of wedlock births and a general acceptance of premarital sex.

According to the findings of Jewkes et al. (2001:734), most families in South Africa are accepting adolescent childbirth, as evidenced by the way the families take care of the babies and the support they give to the teenage mothers when they return to school. The researcher therefore concluded that there was a breakdown in cultural traditions (Wahab, Odunsi & Ajiboye, 2012:1; Macleod & Durrheim, 2002:778-801) in Belfast, Mpumalanga in South Africa, especially pertaining to marriage.

Similarly, the empirical study established that teenage pregnancy promoted the formation of single-parent families, which also went against the traditional pattern of marriage. All participants in this study showed that they just had a baby but had not planned to start families of their own. The boyfriends of the participants did not even suggest marriage because most of them were young and not ready to start a family. Literature findings supported the view that the prevalence of adolescent childbearing is a manifestation of greater occurrences of single-parent families (Domenico & Jones, 2007:5). Single parent families were well known for their inability to give adequate child support mostly due to the economic disadvantages they experienced.

Sub-theme 3 Economic and social dependency on the state

Teenage pregnancy increases economic and social dependency on the state, especially in terms of health delivery services, child support grants and human resource development (Nandi et al., 2014:670). Teenage pregnancy and childbearing could put unnecessary pressure on health delivery services because of health complications associated with teenage pregnancy. Nqobile's narrative indicated the implications of pregnancy on the health delivery system of South Africa:

Because he was a premature baby, was seven months, too much sick. During exam time I was doing Grade eight and I wrote two subjects only, the rest of the subjects I was in hospital. I went to hospital, he was sick.

Natividad's (2014:1) research findings indicate that teenage mothers have an increased risk of pre-term delivery and low birth weight; therefore the babies of adolescents may have an increased risk of hospital admission in early childhood. The adolescents' babies are also more likely to rely on public health care throughout their lives because they may have more chronic medical conditions, thereby placing a higher burden on the health delivery system of the country. Teenage pregnancy can therefore pose public health concerns in both developed and developing countries (Nandi et al., 2014:670).

According to Honig's (2012:181) findings, teenage pregnancy costs taxpayers billions each year. Besides the costs incurred by health delivery systems, the participants in this study indicated that they got help from child support grants to raise their children. In so doing, the participants showed that they experienced increased economic and social dependency on the South African government.

Teenage pregnancy affected human resource development by its tendency to limit the future prospects of adolescents and their children. It emerged from literature that teenage pregnancy can cause a reduction of opportunities for both the mother and child of the adolescent. In the empirical study, participants revealed that their education was often interrupted and disturbed. The participants also revealed that some adolescents dropped out of school due to pregnancy-related complications such as failure to cope with the roles of motherhood and schooling. The implication was that when a pregnant adolescent, for instance, failed to realise her career dreams due to pregnancy, it led to loss of potential and human resources which were necessary for the economic development of a country. Literature confirms that when an adolescent's education is terminated, it also often leads to loss or reduction of earning power and a life of poverty that is not good for society because the adolescent may rely more on state assistance (Akella & Jordan, 2015:42).

Sub-theme 4 Demographic impact

Teenage pregnancy could have negative implications on the population of a country in terms of population growth rates, people's health and the quality of the populace. Besides increasing the population growth rate, adolescent childbirth gave society children who were often abused, neglected and, in some instances, unhealthy. The babies of adolescents often experienced neglect because they were born at a time when their parents were not ready to care for them. The participants in this study revealed that their pregnancies were not planned and their parents were not expecting them to fall pregnant, hence the arrival of their infants was most probably unwelcome. The research findings by Goyder, Blank and Peters (2005:1) indicated that babies deserve to be born into welcoming families for proper upbringing. Improper upbringing promotes anti-social behaviours of children, which can lead to societal problems such as criminality. Literature findings by Dube (2011:1) confirm that statistics show that the children of adolescent mothers have a 13 percent greater chance of ending up in prison, mostly because of the poor upbringing they receive from inexperienced adolescent mothers.

Teenage pregnancy is associated with negative life expectancy implications for the adolescent mothers and their babies. The adverse health outcomes of teenage pregnancy to the pregnant teenager and her baby may, for instance, shorten their lives. Literature findings by Odejimi and Young (2016:20) revealed that as the teenage pregnancy rate increases, life expectancy rates of teenage mothers and their children decrease due to health complications associated with teenage pregnancy. The implication was that if adolescent childbearing was not controlled, most of the communities in South Africa would continue to receive children with poor health and abnormalities, a scenario that would bring long-term negative outcomes to the entire population. The researcher concluded that teenage pregnancy and childbearing impacted negatively on communities, the state and society at large.

6.3.5 Adolescent Post-pregnancy reflections

After navigating through the path of teenage pregnancy and childbearing, the participants in this study were able to reflect on their experiences and to interpret their circumstances.

6.3.5.1 Theme 1 Lifetime lessons

The participants in this study discovered that adolescent relationships could bring an array of problems and therefore should be avoided. Literature findings confirm that adolescent pregnancy poses major challenges (see Domenico & Jones, 2007:4). The participants revealed that boyfriends were in most cases unreliable because they often did not accept responsibility for their girlfriends' pregnancies. In most cases the pregnant adolescent was left alone to deal with her pregnancy. Nxoliswa's narrative summarised the general trend faced by participants upon discovering that they were pregnant:

I was blinded by him, he talked sweet words. When I told him of my pregnancy, he said, 'You are on your own, do not even call me.' I cried every day. I tried to call my boyfriend again with the very same number. He said 'Hello, who is that?' It's Nxoliswa.' 'Who is Nxoliswa? I do not know Nxoliswa.' That is when I realised he had moved on.

Lebu revealed that boyfriends eventually ran away:

Boys are cowards. They run away.

The participants revealed that they were left by their boyfriends at the most crucial time when they needed their support.

Most participants indicated that giving birth and raising a child as an adolescent was a mammoth task that should be avoided. Some indicated that it was premature for them to have

a baby because they were not ready physically, psychologically, emotionally or materially to handle pregnancy. Literature findings confirm that teenage pregnancy causes a sudden role transition that adolescents fail to cope with (Oyedele et al., 2014:80). The participants indicated that it was only after pregnancy that they realised the reality of pregnancy and its unfavourable outcomes such as ill health and the challenges of maternal roles. Nxoliswa, like most of the participants, advised teenagers to wait for the right time:

As a teenager you have not known everything and the body is not ready, and then just stay that way to abstain and wait for the right man and right time. Raising a child is much of a work because she can cry and you never know why she is crying because she cannot speak.

The difficulties of teenage pregnancy and motherhood revealed by participants support Hunter's (2010:127) research findings that it is the teenage mother who often bears the brunt of pregnancy, birth and parenthood.

The participants acknowledged the dangers of peer influences in sexual decision making and the importance of saying 'no' to peer pressure. Most of the participants later realised that they were not supposed to be negatively influenced by friends, especially concerning sexual decision making that later resulted in their pregnancies. Harmony revealed the common feelings of the participants from semi-urban township environments:

I wish I had been a more self-centred girl, not that going out person. I wish I had been a girl who had been better to herself and did not go places where my friends wanted me to go with them.

The participants realised the importance of safe sexual practices not only to protect them from pregnancies but also to prevent sexually transmitted diseases. The majority of the participants also realised that it was very important for them to have listened to elders prior to their pregnancies in order to avoid the pregnancy situations they finally got into and the consequences thereof.

6.3.5.2 Theme 2 Future outlooks

After going through their experiences of pregnancy the participants shared their future outlooks. Some of the participants perceived teenage motherhood as a positive and transformative experience that fostered personal growth (see Jennifer et al., 2012:181). Nomasonto summarised the sentiments of the majority of participants about their future lives:

I told myself that one day they would be proud of me.

Nxoliswa accepted her new role as mother and promised to be a role model to her baby:

I do not chase after teenage life anymore because I think I should be a role model to her (her baby) and start doing right.

Pretty realised that she had to change her behaviour of going to taverns to avoid another pregnancy:

So I decided to stay at home. Because if you go to taverns and do those things, tomorrow you end up being pregnant again.

The participants also indicated that they might have followed the wrong path of pregnancy but at the end of the day they still needed support from society to reshape their lives and the future of their babies. Goyder et al. (2005:7) indicated that supporting teenage parents creates a renewed sense of purpose and increased motivation to continue with schooling. The empirical findings are also in line with literature findings that, although adolescent pregnancy is associated with a number of negative consequences, for some young people parenthood can be a positive and life-enhancing experience, especially if teenage mothers are given adequate support (Swann, Bowe, Kosmin & McCormick, 2003:1).

6.4 RECOMMENDATIONS BASED ON THE FINDINGS OF THE STUDY

Based on the evidence obtained from this study, the following recommendations have been suggested to guide policy decisions that will help reduce the incidence of teenage pregnancy and also to assist all relevant stakeholders in handling pregnant teenage girls and teenage mothers in their care. The recommendations were made in recognition of female adolescents' experiences and perceptions of teenage pregnancy in the empirical study and the literature review findings. Major collaborative efforts are needed for teenage pregnancy prevention from various stakeholders in line with the Bioecological Theory by Bronfenbrenner. Addressing teenage pregnancy and teenage parenthood should be the responsibility of the Departments of Education, Health and Social Development, together with families, schools and community agencies.

6.4.1 National awareness campaigns to curb teenage pregnancies

- Most teenage pregnancies are unintended and therefore have negative implications for society. The researcher recommends that a multifaceted campaign to educate the public about the major social and public health burdens of unintended pregnancies should be launched. With the help of mass media such as television, social and print media, the Departments of Basic Education, Health and Social Development, in particular, can

coordinate in educating the public in this regard. The campaigns for public awareness should start from the ministerial levels down through the line functions of the departments to reach grassroots levels. Youth Day commemorations and celebrations, for instance, can be utilised by government officials at both national and local levels to educate the youth about the negative implications of teenage pregnancies for society, the influences of sexual activities and the risks of sexually transmitted infections (STIs).

- Local government institutions such as local municipalities, through the efforts of mayors and councillors, can take the initiative to stimulate a comprehensive set of activities at the local levels to reduce such pregnancies. The mayors and councillors can visit schools to educate students about the negative implications of teenage pregnancy. The ward councillors can also address parents in their wards to educate them about the consequences of teenage pregnancies.
- Local government departments, especially local municipalities, should stimulate the need for positive life changes of adolescents by giving more attention to the marginalised populations, especially people in rural, farm and semi-urban settings who normally experience economic disadvantages. This can be done by improving infrastructure such as building more schools, clinics and recreational facilities in these areas. Such efforts can address social and economic inequalities which have long term benefits of reducing teenage pregnancy rates because adolescents who experience economic disadvantages often have fewer reasons to delay sexual activities.
- The Department of Social Development and local government should address the negative self-perceptions that characterise many marginalised adolescent populations by making adolescents aware of future career opportunities. The local municipalities can mobilise the corporate world, for instance, to provide more bursaries towards career development of adolescents in tertiary institutions. By so doing, the marginalised adolescents, especially from rural and farm environments can naturally see the long term benefits of delaying adolescent childbearing.
- The Department of Social Development and local government must focus more on what is happening in the families, especially with regard to child neglect and irresponsible parenting. Social workers, in partnership with ward councillors, should institute family outreach programmes to teach parents about the effectiveness of communication, parental guidance, monitoring and control of adolescents in particular. This can be done by calling for parents' meetings at designated gathering places in the communities to

address these issues. Principals should, accordingly, advise parents during parents' meetings at schools.

- Local councillors, together with local health service providers, should institute community outreach programmes to build collective consciousness about the need for safe sexual practices. The campaigns can be done during ward meetings. Local municipalities should put posters with abstinence safe sex messages in strategic positions of the communities such as shopping centres, clinics, taverns and schools.
- Local counsellors and social workers, by virtue of their knowledge base about the needs of adolescents, should frequent schools more often to teach the adolescents about self-control, the positives of delaying childbirth and future prospects when completing school. The Department of Social Development in partnership with the Department of Basic Education must also train teachers how to handle teenagers in schools.
- There is need for a structured community approach in reducing the incidence of teenage pregnancy. Local education officials such as principals and teachers, health providers such as sisters in charge of clinics and nurses and community social workers can team up to educate learners in schools as well as parents in their communities about the positives of planned and intended pregnancies, including the long term benefits of such pregnancies to any country and the world.
- In order to address the gender imbalances in sexual negotiations and safe sexual practices, community leaders such as councillors during community gatherings, principals at schools, health providers at clinics and pastors during church proceedings, must inculcate respect of females in order to empower female adolescents in sexual decision making.
- The law enforcement agencies such as police service providers must apply the law of underage drinking more effectively because alcohol abuse in most South African communities is influencing unsafe sexual practices by adolescents. Police service providers should visit taverns more frequently in order to get rid of underage drinkers and also to arrest business people who continue to sell liquor to young boys and girls in taverns.
- The researcher appeals to the corporate world and non-governmental organisations (NGOs) to join hands with government in promoting national awareness campaigns to reduce teenage pregnancy rates. Broadcast media such as television, radio and newspapers should put more emphasis on promoting responsible sexual behaviour by the

youth and also inculcating the benefits of abstinence and delaying adolescent childbirth. The SABC and eTV producers must consider producing more programmes that teach responsible sexual behaviours. The impressionable adolescents can imitate good sexual behaviours from such programmes. South Africa's mobile operators, Vodacom, MTN, Cell C and Telkom must, as they advertise their products, consider including messages that emphasise abstinence and safe sexual practices of the youth in particular with the aim of curbing teenage pregnancy rates.

6.4.2 Life Orientation curriculum review by the Department of Basic Education

- The Department of Basic Education must address the controversy surrounding sex education in order to come up with meaningful sexual and relationship education in schools. The education directors responsible for curriculum development must take into account the fact that the adolescents of today are living in more sexualised environments putting a lot of pressure on adolescents to indulge in inappropriate sexual activities. The current curriculum, especially the Life Orientation curriculum, therefore does not address the curriculum needs of today's adolescent in terms of sexual and relationship education adequately. Most adolescents engage in sexual relationships without adequate knowledge and information pertaining to reproductive health especially. The curriculum must focus on identifying and addressing the social contexts of adolescents' inappropriate sexual behaviours such as social media, peer pressure, taverns and hostile home environments. This involves teaching adolescents about the best ways of responding to the influences of such contexts like, for instance, teaching them how to handle peer pressure.
- The Life Orientation curriculum, in terms of sexual and relationship education, must provide convincing reasons and benefits for delaying sexual activities and adolescent childbirth such as the positives of abstinence in preventing teenage pregnancies, the risks of HIV and AIDS and sexually transmitted infections (STIs)
- Legal issues pertaining to pregnancy must also be addressed by the curriculum. Issues such as termination of pregnancy, adoption, foster care, statutory rape and legal age of marriage must be incorporated in the curriculum to widen their knowledge of sexual issues necessary for sound decision making by adolescents.
- The Life Orientation curriculum should have more focus on the psychological, moral and social aspects of sexuality such as an explanation of the differences between love and sexual desires because of the emphasis on sexuality development in adolescence; outlining the decision making processes for initiating sexual relationships; dealing with

peer pressure; the consequences of sexual relationships; the influences of initiation schooling on adolescent sexual behaviours; cultural beliefs about sex and other sex related values in the reviewed Life Orientation curriculum.

- The researcher recommends that the reviewed Life Orientation curriculum should also address contraceptive matters especially misconceptions, myths and beliefs about contraceptive methods, barriers in accessing contraceptives and the skills necessary for negotiating safe sex.
- The Life Orientation curriculum must incorporate teaching methods that stimulate learners' interests to learn about sexual matters, such as providing visuals or videos that depict safe sexual practices to promote observational learning of good sexual behaviours by adolescents.
- The curriculum must put more emphasis on developing social skills in female adolescents in particular, to prepare them for healthier interactions with people of the opposite sex. This involves decision making and assertiveness skills training which include communication skills to convey their thoughts, express their preferences and opinions with self-confidence. In other words, instruction in schools must balance between academic and social skills development to promote character building of adolescents that entail learning to respect others and to act responsibly. Social skills development can be achieved by allowing adolescents to participate in role playing activities. The role play activities should promote assertive behaviours of adolescents especially, to make them develop self-confidence to say 'no' when pressurised, to go to taverns or to indulge in inappropriate sexual behaviours.

6.4.3 Health delivery services' reorientation

- Health delivery service providers must accept that adolescents are sexually active but their contraceptive practices are very poor, therefore there is a need to improve accessibility of contraceptives to adolescents.
- There is a general underutilisation of reproductive health delivery services from clinics, especially by adolescents from rural, farm and semi-urban settings. It means that the female adolescents from rural, farm and semi-urban settings should become the target groups for sexual health services. Besides building more clinics, health delivery providers must make use of mobile clinics on certain prescribed days to minimise the underutilisation of reproductive health delivery services by adolescents in such areas.

- Health service providers should focus more on imparting knowledge about contraception, early or unintended pregnancy and reproductive health in general amongst all adolescent boys and girls. The health service providers can impart knowledge to adolescents at clinics as well as during their regular visits to schools.
- Health delivery systems should focus on promoting adolescent privacy and freedom to access sexual health services because most female adolescents see obstacles when they need sexual health services from clinics. The sexual health providers must not be judgmental but must be more welcoming, especially when attending to the contraceptive requirements of adolescents. If possible the researcher recommends the utilisation of private rooms in clinics for such services with well-trained staff.
- The researcher advocates for a vigorous campaign to promote awareness and understanding of the need for safe sexual practices amongst all adolescent boys and girls in schools. Health delivery providers must therefore do more outreach work in schools to address the negative perceptions of adolescents about sexual health service providers, to discuss prevention of sexually transmitted diseases and early/adolescent pregnancies as well as to give options for dealing with unwanted teenage pregnancies. This can help adolescents to come up with informed decisions when dealing with sexual matters.

6.4.4 Schools' and teachers' inputs

- Schools should take into account the fact that the adolescents of today are living in a digital world. The adolescents are navigating in this world mostly in the comfort of their homes and with very little or no adult supervision at all. Schools must be aware that the digital world does not take into account age appropriateness in terms of sexual content. The digital world uses the one size fits all concept whereby anyone at any time and at any place can access any content. The media emphasis on sexuality is also putting a lot of pressure on adolescents to initiate sexual acts at an early age. This means that schools have a role in promoting safe sexual practices by adolescents.
- Education about digital media is important. Teachers must be workshopped by curriculum advisors to equip them with skills that can address the current curriculum needs of especially adolescents. The Department of Basic Education must provide schools with curriculum materials that are age appropriate, technologically up to date, gender and culture sensitive in order to respond more positively to the curriculum needs of the 21st century child.

- School teachers are encouraged to take a more active role in awakening teenagers' understanding of the power of television and digital media such as Facebook, Twitter and WhatsApp in influencing them to indulge in inappropriate sexual activities.
- Most pregnant teenagers and mothers report unfriendly school environments. Support systems for pregnant teenagers and teenage mothers are also lacking in schools and communities. Community social workers and teachers should work towards improving the support systems for pregnant and parenting teenagers to help them to realise their future ambitions and also to minimise school dropout of pregnant teenagers. This involves assessing their situations at home and at school as well as attending to their concerns and special needs. School principals should delegate senior female teachers to play consultative roles on possible challenges that pregnant teenagers and mothers experience at school and at home. Where possible, the senior female teachers can consult social workers on any major challenges that pregnant teenagers and mothers may bring to their attention.
- Special attention is badly needed for teachers to close the gap of inadequate information from African parents especially, by constantly informing teenagers about safe sexual practices. Local health delivery providers, social workers and teachers must from time to time discuss adolescent sexual health matters with both boys and girls. On certain days during the term social workers and teachers should address learners especially from Grades 6-12 about safe sexual practices.
- Schools must take Grades 9 and 10 adolescents as the most vulnerable grades that need more attention and information about pregnancy prevention and safe sexual practices. The reviewed Life Orientation curriculum must also take into account that Grades 9 and 10 adolescents are the most vulnerable to early pregnancies. The Life Orientation teachers of these grades, in partnership with social workers, must from time to time emphasise the need for safe sexual practices by these learners.

6.4.5 Adults', parents' and caregivers' responsibilities

- Adults are directly or indirectly responsible for many teenage pregnancies worldwide. Many parents are responsible for creating unfavourable home environments for their children, especially in single-parent families without fathers. Adults are allowing media programmes which depict explicit sex to be viewed by young people. Adults are behind the creation of the digital world and they do not educate people towards digital safety.

Adults are also responsible for policy decisions that affect the young people of today like the liberal policy that allows pregnant teenagers to return to school after pregnancy. The researcher therefore recommends collaborative efforts by adults in addressing the circumstances of the adolescents to come up with meaningful solutions geared towards minimising teenage pregnancy rates.

- Parents and primary caregivers must be aware that children internalise positive reactions from significant others when they receive support, acceptance and approval from them (Rogers, 1969:22). They can also develop negative perceptions of themselves if they are brought up in rejecting, hostile and unfriendly home settings created by parents or primary caregivers. The Department of Social Development in partnership with local government and the Department of Basic Education must therefore educate parents on their parental responsibilities.
- The inadequacies of some foster care parents in looking after foster children were established in the empirical study. The Department of Social Development or social service agencies must from time to time assess the way foster care parents look after the foster teenage children in their care.
- The empirical findings revealed the inadequacy of children's homes in guidance, supervision and control of female adolescents. The Department of Social Development, especially child welfare agencies, must ensure that South African children's homes improve supervision, control, guidance and information dissemination to their children especially concerning sexual matters.
- Local government councillors must make African parents aware that even though they may find it difficult to communicate with their adolescents about sexual matters because of cultural beliefs, their children can access information from media, internet and social networks, therefore it is important for parents to give their children sexual information that is coupled with values to equip their children with life skills that are necessary for the challenges ahead.
- Parents should be aware that female adolescents are in most cases reluctant to visit clinics for sexually related services therefore they should take the first step to accompany their children to the clinics for such services at the most appropriate time. The health delivery providers in clinics should also encourage parents to act accordingly.
- Elders and community leaders must discuss with adults responsible for initiation schools a review of their curriculum. The reviewed curriculum should include teachings about

the importance of respecting females. The elders must consider teaching about the importance of delaying sexual activities after initiation schooling. The elders and community leaders must also emphasise the positives of intended and planned pregnancies in order for the adolescents to exercise self-control.

6.5 RECOMMENDATIONS FOR FUTURE RESEARCH

- This study was limited to African female adolescents who experienced teenage pregnancy to full term. Further research is needed on the perceptions of teenage pregnancy amongst adolescent female learners in other cultural groups.
- This study focussed on the female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga. There is need for further research in other areas of the province as well as areas outside the province of Mpumalanga.
- A longitudinal study is needed to assess the quality of life led by the babies of adolescent mothers.
- There is need for further research on the impact of initiation schooling on adolescent sexual behaviours.
- Further research is needed on the impact of social inequalities on teenage pregnancy in South Africa.
- One avenue for further study would be on adolescent fathers' experiences and perceptions of parenthood.
- It is important and relevant to investigate the perceptions of teachers and parents about sex and relationship education.

6.6 LIMITATIONS OF THE STUDY

All measures were taken to ensure credibility of results in this study but, like any other qualitative research study, limitations were inevitable.

I should stress that my study has been primarily concerned with female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga. As a qualitative phenomenological study, a small sample of 20 participants who experienced teenage pregnancy to full term and known by parents and their respective schools, took part in this study. The limitation of the sample is that there are female participants who did not experience teenage pregnancy to full term but could have supplied the researcher with

information. However, the researcher wanted to minimise risk factors for participants, especially in consideration of confidential information associated with a study of this nature.

Just like any other qualitative study, the results of this study cannot be generalised to the larger population of the province of Mpumalanga as well as South Africa due to lack of representativeness. A small sample is the major limitation of any qualitative study of this nature. However, the purpose of the study was not to generalise but to study the perceptions of participants in depth.

In this study, the researcher employed individual semi-structured interviews. The researcher was aware of the fact that more data collection methods could have been used in order to gain more information. However, the researcher applied individual interviewing, literature study and member checking to facilitate triangulation.

6.7 CONCLUSION

Bronfenbrenner's bioecological theory emphasises that, in order to understand human development, one must consider the entire ecological system in which development occurs. It is in this regard that the researcher considered the various subsystems in which female adolescents developed in order to gain more insight into the factors that influenced female adolescents' sexual behaviours and their perceptions of teenage pregnancy.

As adolescents go through the transition of adolescence, they respond to a variety of social contexts which they firstly encounter within their immediate social environments of the microsystems like the home environment, peer influences and school interactions, all of which can influence them either positively or negatively. They also respond to the influences of broad social contexts of the macrosystems such as culture and socio-economic status.

The study established that adolescent developmental influences such as heightened sexual interests, unstable family environments, psycho-emotional instability, adolescent thinking patterns, moral judgments and adolescent contraceptive practices were responsible for shaping adolescents' sexual behaviours and their perceptions of teenage pregnancy. The study established that teenage pregnancy affected the life-world of adolescents in a number of ways, for instance, the stereotypic tendencies of society and the stigma associated with pregnancy could create an unfavourable social environment for a pregnant adolescent. In so doing, the adolescent experienced social exclusion that disturbed normal social development.

The researcher established from the empirical and literature review that the broader social contexts such as African cultural values, customs and beliefs, socioeconomic status, technological and internet usage, media and social networks all played a part in influencing adolescent perceptions of teenage pregnancy. For example, the cell phone has become an essential tool for adolescents of today to initiate and maintain romantic relationships without much interference from parents or primary caregivers. The adolescent of today is able to interact with the outside world through, for instance, social networks in the comfort of their homes. Increased connectivity with friends makes adolescents more vulnerable to peer influences to initiate sexual activities that may result in pregnancies.

Although Bronfenbrenner's bioecological theory emphasises that the microsystem has a direct influence on children's development, the empirical findings established that technological advancements allowed the children of today to interact more actively with people in distant places than before. Globalisation has made distance and time irrelevant. The digital media has made it possible for adolescents to easily interact with the outside world in the comfort of their homes. In the process of doing so many adolescents get tempted to experiment with inappropriate sexual activities that make them vulnerable to unwanted pregnancies.

Consequences of teenage pregnancy for adolescents, their families, communities and society were established in the empirical and literature studies. Teenage pregnancy was associated with negative financial implications for families and the state. Society continues to receive the babies of adolescent mothers who, in most cases, experience health complications and poor upbringing by their inexperienced adolescent mothers. Due to poor upbringing, the majority of adolescent children indulge in anti-social behaviours that impact negatively on the social fabric of society.

The study established that most of the circumstances that influenced the inappropriate sexual behaviours of adolescents were directly or indirectly created by adults, parents and primary caregivers. Some parents and primary caregivers, for instance, created hostile home environments for adolescents thereby forcing them to seek comfort from unreliable boyfriends. Adults also created media programmes that portrayed irresponsible sexual models for the impressionable adolescents. The researcher therefore concluded that collaborative efforts by adults in government and private spheres are needed in teenage pregnancy prevention and in support of adolescent mothers and their babies.

The study established that the high rates of teenage pregnancy in Belfast, Mpumalanga were mostly attributed to contraceptive failure, premature and unprotected sexual activities by adolescents especially from rural, farm and semi-urban settings. Teenage pregnancy could remain a social problem if all stakeholders in all walks of life continue to have indifferent attitudes towards its prevention.

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APPENDICES

Appendix A: Proof of registration

1816

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SIYIFUNILE SECONDARY
P O BOX 222
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STUDENT NUMBER : 4659-063-3
ENQUIRIES TEL : 0861670411
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2017-03-25

Dear Student

I hereby confirm that you have been registered for the current academic year as follows:

Proposed Qualification: DED(PSYCHOLOGY OF EDUCATION) (98406)

PROVISIONAL EXAMINATION

| CODE | PAPER | S | NAME OF STUDY UNIT |
|--------|-------|-----------|--------------------|
| WEIGHT | LANG. | EXAM.DATE | CENTRE(PLACE) |
| ---- | ----- | - | ----- |

Study units registered without formal exams:

@ TFPSE05 D ED - PSYCHOLOGY OF EDUCATION

1.800 E

TFPSE05 D ED - PSYCHOLOGY OF EDUCATION

1.800 E

@ Exam transferred from previous academic year

You are referred to the "MyRegistration" brochure regarding fees that are forfeited on cancellation of any study units.

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| RECEIPT NUMBER: | CASH: | CHEQUE: | CARD: |
| POSTAL ORDER: | MONEY ORDER: | FOREIGN: | |
| 20170324-8538-039 | | | 16200.00 (Straight) |

STUDY FEES: 16200.00

BALANCE ON STUDY ACCOUNT: 0.00

Yours faithfully,

Prof QM Temane
Registrar (Acting)
0108 0 00 0

Appendix B: Permission Mpumalanga Department of Education Nkangala District



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The District Director
Mr J. J. Mabena
Mpumalanga Department of Education
KwaMhlanga Mpumalanga Province
KwaMhlanga
Tel: +2713 947 1500

Dear Sir

Re: Request for permission to conduct research at MP1, MP2 and MP3 Secondary Schools

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Mr Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at

MP1, MP2 and MP3 Secondary Schools on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

The aim of the study is to explore the adolescents' experiences and perceptions of teenage pregnancy in the schools. The schools have been selected because of their proximity to the researcher and it will be easier for the researcher to interview the adolescent female learners within their natural settings. The researcher also believes that there are participants in the schools with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 20 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent or assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' experiences and perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the

event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide the schools with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix C: Permission Mpumalanga Department of Education Circuit Office



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The Circuit Manager
Ms. S. N. Motloung
Mpumalanga Department of Education
Emakhazeni Circuit
P Bag x07
Waterval Boven
1195
Tel:+2713 253 0777/8

Dear Madam.

Re: Request for permission to conduct research at MP1, MP2 and MP3 Secondary Schools

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Mr Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of

South Africa. We hereby humbly request for your permission to conduct research at MP1, MP2 and MP3 Secondary Schools on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

The aim of the study is to explore the adolescents' experiences and perceptions of teenage pregnancy in the schools. The schools have been selected because of their proximity to the researcher and it will be easier for the researcher to interview the adolescent female learners within their natural settings. The researcher also believes that there are participants in the schools with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 20 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if

they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide the schools with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix D: Permission Principal MP1 Secondary School



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The Principal
MP1 Secondary School

Dear Sir

Re: Request for permission to conduct research at MP1 Secondary School

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at your school on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga

The aim of the study is to explore the female adolescents' experiences and perceptions of teenage pregnancy at your school. Your school has been selected because of its proximity to the researcher and it will be easier for the researcher to

interview the adolescent female learners within their natural setting. The researcher also believes that there are participants in the school with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 7 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide your school with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk

with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix E: Permission Principal MP2 Secondary School



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The Principal
MP2 Secondary School

Dear Sir

Re: Request for permission to conduct research at MP2 Secondary School

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at your school on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

The aim of the study is to explore the female adolescents' experiences and perceptions of teenage pregnancy at your school. Your school has been selected because of its proximity to the researcher and it will be easier for the researcher to

interview the adolescent female learners within their natural setting. The researcher also believes that there are participants in the school with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 7 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide your school with a bound copy of the full research report. I will share guidelines with teachers and parents to help

with curbing the problem and to handle pregnant teenagers. I will also have a talk with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix F: Permission Principal MP3 Secondary School



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The Principal
MP3 Secondary School
Dear Sir

Re: Request for permission to conduct research at MP3 Secondary School

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at your school on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga

The aim of the study is to explore the female adolescents' experiences and perceptions of teenage pregnancy at your school. Your school has been selected because of its proximity to the researcher and it will be easier for the researcher to interview the adolescent female learners within their natural setting. The researcher

also believes that there are participants in the school with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 6 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide your school with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk

with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix G: Permission SGB MP1 Secondary School



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The School Governing Body
MP1 Secondary School

Dear Sir/Madam

Re: Request for permission to conduct research at MP1 Secondary School

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Mr Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at your school on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

The aim of the study is to explore the female adolescents' experiences and perceptions of teenage pregnancy at your school. Your school has been selected because of its proximity to the researcher and it will be easier for the researcher to interview the adolescent female learners within their natural setting. The researcher also believes that there are participants in the school with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 7 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide your school with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix H: Permission SGB MP2 Secondary School



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The School Governing Body
MP2 Secondary School

Dear Sir/Madam

Re: Request for permission to conduct research at MP2 Secondary School

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Mr Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at your school on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

The aim of the study is to explore the female adolescents' experiences and perceptions of teenage pregnancy your school. Your school has been selected

because of its proximity to the researcher and it will be easier for the researcher to interview the adolescent female learners within their natural setting. The researcher also believes that there are participants in the school with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 7 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide your school with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix I: Permission SGB MP3 Secondary School



Mr Mudzokora W
POBox 222
Dullstroom
E-mail:mudzokoraw@gmail.com
Cell no: +2776 519 2803

20 June 2016

The School Governing Body
MP3 Secondary School

Dear Sir/Madam

Re: Request for permission to conduct research at MP3 Secondary School

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

I, Mr Wilton Mudzokora, am doing research with Professor E Venter in the Department of Psychology of Education towards a DEd degree at the University of South Africa. We hereby humbly request for your permission to conduct research at your school on the topic: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

The aim of the study is to explore the female adolescents' experiences and perceptions of teenage pregnancy your school. Your school has been selected

because of its proximity to the researcher and it will be easier for the researcher to interview the adolescent female learners within their natural setting. The researcher also believes that there are participants in the school with experience and knowledge of teenage pregnancy.

The study will entail individual face-to-face interviews with 6 participants. The interviews will be conducted after school to avoid interference with school conduct time. Each interview will take approximately 45-60 minutes and the interviews will be audio recorded with consent and assent of the participants, as well as consent from the parents/caregivers.

The benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, to support policy decision making as well as to contribute to the improvement of practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers.

In order to protect the rights and privacy of participants, ethical measures such as confidentiality and anonymity will be strictly adhered to by the researcher. The participants will be informed in writing that their participation is voluntary and that they were free to withdraw at any time without victimisation.

The risks anticipated for participants in this study include inconvenience of partaking in interviews and possible psychological/emotional discomfort for the participants if they are traumatised by their pregnancy and its consequences. However, in the event that the interviews cause psychological or emotional discomfort to the participants the researcher arranged with Miss S Skhosana a qualified psychologist for counseling.

Upon completion of this study, I undertake to provide your school with a bound copy of the full research report. I will share guidelines with teachers and parents to help with curbing the problem and to handle pregnant teenagers. I will also have a talk with the adolescents and give them guidance as to dealing with pregnancy and the importance of not falling pregnant whilst still busy completing their school career.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za

Your permission to conduct this study will be greatly appreciated.

Yours sincerely

.....

Wilton Mudzokora

Personnel no: 830 69178

ID NO: 620105 6319187

Educator at Siyifunile Secondary School

Appendix J : Consent letter for individual interviews (Participants over 18 years of age)



20 June 2016

Title: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

Dear Prospective Participant

My name is Mr Wilton Mudzokora and I am doing research with Professor E Venter, a professor in the Department of Psychology of Education towards a DEd degree, at the University of South Africa. We are inviting you to participate in a study entitled: "Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga".

You were chosen to participate in this study, because of your experience of teenage pregnancy and the knowledge you can impart. The researcher believes that your experiences and perceptions of teenage pregnancy would assist tremendously in answering the research questions in this study, but also to aid other pregnant teenagers by giving guidelines to parents and teachers about assisting them.

You will receive no direct benefit from participating in the study, however, the possible benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so

often, and to improve practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers. You will not receive payment or any incentives for participating in this study. There are also no anticipated costs that you will incur for participating. Although you will not receive any type of payment for participating in this study, talking through one's situation may have therapeutic benefits.

You were selected to participate in an **individual face-to-face interview**. A total of 20 participants from MP1, MP2 and MP3 Secondary Schools will participate in the individual interviews.

The study involves audio taped semi-structured interviews. You will be requested to answer open-ended questions in the interview. The questions will focus on your perceptions and experiences of teenage pregnancy. The interview will take approximately 45-60 minutes and will be conducted after school to avoid loss of school conduct time.

The risks anticipated in this study include the inconvenience of giving time to the project and possible psychological/emotional discomfort. In the event that the interviews cause psychological/emotional discomfort, arrangements have been made with Miss S Skhosana, a qualified psychologist, for counseling.

The information that you provide in the interviews may be recognisable by others, therefore pseudonyms will be used instead of your real names. All taped interviews will be locked in a filing cabinet at my home office for your protection for a period of five years. For future research or academic purposes; electronic information will be stored on a password protected computer. After a period of 5 five years hard copies will be shredded and electronic copies will be permanently deleted from the hard drive of the computer through the use of a relevant software programme. Inaccurate portrayal of situations and participants may cause psychological/emotional discomfort, but you will be provided with a copy of the transcripts made of the interviews to validate the accuracy of the findings.

Participating in this study is voluntary and you are under no obligation to consent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written consent form. You are free to withdraw at any time and without giving a reason. You have the right to insist that your name will not be recorded

anywhere and that no one, apart from the researcher and identified members of the research team, will know about your involvement in this research. Your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a code and a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings.

Your answers may be reviewed by people responsible for making sure that the research is done properly, that include my supervisor, Professor Venter. Otherwise, records that identify you will be available only to the researcher. Your data may be used for other purposes, such as a research report, journal articles and/or conference proceedings submitted for publication, but individual participants will not be identifiable in such publications.

This study has received written approval from the Research Ethics Review Committee of the College of Education, Unisa. A copy of the approval letter can be obtained from the researcher if you so wish.

When I am finished with my study, I shall return to your school to give a short talk about some of the helpful and interesting ideas you presented me with. I shall invite you to come and listen to my talk. If you would like to be informed of the final research findings, please contact Mr Wilton Mudzokora on +2776 519 2803 or email: mudzokoraw@gmail.com. The findings are accessible for a period of five years.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za.

Thank you for taking time to read this information sheet and for participating in this study.

Thank you.

.....

Mr Wilton Mudzokora

CONSENT TO PARTICIPATE IN THIS STUDY (Individual interviews-Return slip)

I, _____ (participant name), confirm that the person asking my consent to take part in this research has told me about the nature, procedure, potential benefits and anticipated inconvenience of participation.

I have read (or had explained to me) and understood the study as explained in the information sheet.

I have had sufficient opportunity to ask questions and am prepared to participate in the study.

I understand that my participation is voluntary and that I am free to withdraw at any time without penalty.

I am aware that the findings of this study will be processed into a research report, journal publications and/or conference proceedings, but that my participation will be kept confidential unless otherwise specified.

I agree to the recording of the interview.

I have received a signed copy of the informed consent agreement.

Participant Name & Surname (please print)_____

Participant Signature

Date

Researcher's Name & Surname (please print): Mr WILTON MUDZOKORA

Researcher's signature

Date

Appendix K: Assent letter for individual interviews (Participants below 18 years of age)



20 June 2016

Title: “Female adolescents’ experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga”.

Dear Prospective Participant

My name is Mr Wilton Mudzokora and I am doing research with Professor E Venter, a professor in the Department of Psychology of Education towards a DEd degree, at the University of South Africa. We are inviting you to participate in a study entitled: “Female adolescents’ experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga”. Your principal has given us permission to do this study in your school.

This letter is to explain to you what I would like you to do. There may be some words you do not know in this letter. You may ask me or any other adult to explain any of these words that you do not know or understand. You may take a copy of this letter home to think about my invitation and talk to your parents about this before you decide if you want to be in this study. Your parents will be given a copy of your signed assent form and will also be asked to give permission on your behalf.

You were chosen to participate in this study, because of your experience of teenage pregnancy and the knowledge you can impart. The researcher believes that your perceptions

of teenage pregnancy would assist tremendously in answering the research questions in this study, but also to aid other pregnant teenagers by giving guidelines to parents and teachers about assisting them.

You will receive no direct benefit from participating in the study, however, the possible benefits of this study are inter alia to heighten awareness of adolescents' experiences of teenage pregnancy, to extend the knowledge base related to adolescents' perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, and to improve practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers. You will not receive payment or any incentives for participating in this study. There are also no anticipated costs that you will incur for participating. Although you will not receive any type of payment for participating in this study, talking through one's situation may have therapeutic benefits.

You were selected to participate in an **individual face-to-face interview**. A total of 20 participants from MP1, MP2 and MP3 Secondary Schools will participate in the individual interviews.

The study involves audio taped semi-structured interviews. You will be requested to answer open-ended questions in the interview. The questions will focus on your perceptions and experiences of teenage pregnancy. The interview will take approximately 45-60 minutes and will be conducted after school to avoid loss of school conduct time.

The risks anticipated in this study include the inconvenience of giving time to the project and possible psychological/emotional discomfort. In the event that the interviews cause psychological/emotional discomfort, arrangements have been made with Miss S Skhosana, a qualified psychologist, for counseling. The information that you provide in the interviews may be recognisable by others, therefore pseudonyms will be used instead of your real names. All taped interviews will be locked in a filing cabinet at my home office for your protection for a period of five years. For future research or academic purposes; electronic information will be stored on a password protected computer. After a period of 5 five years hard copies will be shredded and electronic copies will be permanently deleted from the hard drive of the computer through the use of a relevant software programme. Inaccurate portrayal of situations and participants may cause psychological/emotional discomfort, but you will be

provided with a copy of the transcripts made of the interviews to validate the accuracy of the findings.

Participating in this study is voluntary and you are under no obligation to assent to participation. If you do decide to take part, you will be given this information sheet to keep and be asked to sign a written assent form. You are free to withdraw at any time and without giving a reason. You have the right to insist that your name will not be recorded anywhere and that no one, apart from the researcher and identified members of the research team, will know about your involvement in this research. Your name will not be recorded anywhere and no one will be able to connect you to the answers you give. Your answers will be given a code and a pseudonym and you will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings.

Your answers may be reviewed by people responsible for making sure that the research is done properly, including the research assistant who will only assist in translation where necessary and my supervisor, Professor Venter. The research assistant will sign a confidentiality agreement form in this regard. Otherwise, records that identify you will be available only to the researcher. Your data may be used for other purposes, such as a research report, journal articles and/or conference proceedings submitted for publication, but individual participants will not be identifiable in such publications.

This study has received written approval from the Research Ethics Review Committee of the College of Education, Unisa. A copy of the approval letter can be obtained from the researcher if you so wish.

When I am finished with my study, I shall return to your school to give a short talk about some of the helpful and interesting ideas you presented me with. I shall invite you to come and listen to my talk. If you would like to be informed of the final research findings, please contact Mr Wilton Mudzokora on +2776 519 2803 or email: mudzokoraw@gmail.com. The findings are accessible for a period of five years.

Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za.

Thank you for taking time to read this information sheet and for participating in this study.

Thank you.

.....

Mr Wilton Mudzokora

WRITTEN ASSENT (Individual interview- participants below 18 years of age)

I have read this letter which asks me to be part of a study at my school. I have understood the information about my study and I know what I will be asked to do. I am willing to be in the study.

| | | |
|-------------------------|----------------------|-------|
| Learner's name (print): | Learner's signature: | Date: |
|-------------------------|----------------------|-------|

| | | |
|------------------------|---------------------|-------|
| Witness's name (print) | Witness's signature | Date: |
|------------------------|---------------------|-------|

(The witness is over 18 years old and present when signed.)

| | | |
|--------------------------------|------------------------------|-------|
| Parent/guardian's name (print) | Parent/guardian's signature: | Date: |
|--------------------------------|------------------------------|-------|

Mr Wilton Mudzokora

| | | |
|---------------------------|-------------------------|-------|
| Researcher's name (print) | Researcher's signature: | Date: |
|---------------------------|-------------------------|-------|

Appendix L: Parent consent form (For individual interview participants)



20 June 2016

Dear Parent

My name is Mr Wilton Mudzokora and I am doing research with Professor E Venter, a professor in the Department of Psychology of Education towards a DEd degree, at the University of South Africa. Your child is invited to participate in a study entitled: “Female adolescents’ experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga”.

Your child was chosen to participate in this study, because of her experience of teenage pregnancy and the knowledge she can impart. The researcher believes that your child’s perceptions of teenage pregnancy would assist tremendously in answering the research questions in this study, but also to aid other pregnant teenagers by giving guidelines to parents and teachers about assisting them.

Your child will receive no direct benefit from participating in the study, however, the possible benefits of this study are inter alia to heighten awareness of adolescents’ experiences of teenage pregnancy, to extend the knowledge base related to adolescents’ perceptions of teenage pregnancy, to identify central themes that explain why teenage pregnancy happens so often, and to improve practice by giving guidelines to teachers and parents for the possible curbing of the problem and in assisting pregnant teenagers. Your child will not receive payment or any incentives for participating in this study. There are also no anticipated costs that she will incur for participating. Although she will not receive any type of payment for participating in this study, talking through one’s situation may have therapeutic benefits.

If you allow your child to participate, I shall request her to take part in an **individual face-to-face interview**. A total of 20 participants from MP1, MP2 and MP3 Secondary Schools will participate in the individual interviews.

The study involves audio taped semi-structured interviews. Your child will be requested to answer open-ended questions in the interview. The questions will focus on her perceptions and experiences of teenage pregnancy. The interview will take approximately 45-60 minutes and will be conducted after school to avoid loss of school conduct time.

The risks anticipated in this study include the inconvenience of giving time to the project and possible psychological/emotional discomfort. In the event that the interviews cause psychological/emotional discomfort, arrangements have been made with Miss S Skhosana, a qualified psychologist, for counseling. The information that your child provides in the interviews may be recognisable by others, therefore pseudonyms will be used instead of real names. All taped interviews will be locked in a filing cabinet at my home office for protection of participants for a period of five years. For future research or academic purposes; electronic information will be stored on a password protected computer. After a period of 5 five years hard copies will be shredded and electronic copies will be permanently deleted from the hard drive of the computer through the use of a relevant software programme. Inaccurate portrayal of situations and participants may cause psychological/emotional discomfort, but your child will be provided with a copy of the transcripts made of the interviews to validate the accuracy of the findings.

Your child's participation in this study is voluntary. Your child may decline to participate or to withdraw from participation at any time. Withdrawal or refusal to participate will not affect her in any way. Similarly you can agree to allow your child to be in the study now and change your mind later without any penalty. You have the right to insist that your child's name will not be recorded anywhere and that no one, apart from the researcher and identified members of the research team, will know about her involvement in this research. Your child's name will not be recorded anywhere and no one will be able to connect her to the answers she gives. Your child's answers will be given a code and a pseudonym and she will be referred to in this way in the data, any publications, or other research reporting methods such as conference proceedings.

Your child's answers may be reviewed by people responsible for making sure that the research is done properly, including the research assistant who will only assist in translation where necessary and my supervisor, Professor Venter. The research assistant will sign a confidentiality agreement form in this regard. Otherwise, records that identify your child will be available only to the researcher. Your child's data may be used for other purposes, such as a research report, journal articles and/or conference proceedings submitted for publication, but individual participants will not be identifiable in such publications.

This study has received written approval from the Research Ethics Review Committee of the College of Education, Unisa. A copy of the approval letter can be obtained from the researcher if you so wish.

When I am finished with my study, I shall return to your child's school to give a short talk about some of the helpful and interesting ideas your child presented me with. I shall invite your child to come and listen to my talk. If you have questions about this study, please contact Mr Wilton Mudzokora on +2776 519 2803 or email: mudzokoraw@gmail.com. Should you have concerns about the way in which the research has been conducted, you may contact Professor E Venter on +2712 4294751 or email: ventee1@unisa.ac.za.

You are making a decision about allowing your child to participate in this study. Your signature below indicates that you have read the information provided above and have decided to allow her to participate in the study. You may keep a copy of this letter.

Sincerely

Name of child:.....

| | | |
|--------------------------------|------------------------------|-------|
| Parent/guardian's name (print) | Parent/guardian's signature: | Date: |
|--------------------------------|------------------------------|-------|

| | | |
|--|------------------------|-------|
| Mr Mudzokora Wilton Researcher's name (print) | Researcher's signature | Date: |
|--|------------------------|-------|

Appendix M: Individual Interview Schedule



Researcher: Mr Wilton Mudzokora

Date:.....

Purpose of study: To explore female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga.

Background information:

Name:.....

Current Grade:.....

Date of birth:.....

Grade when you fell pregnant:.....

Your age when you fell pregnant:.....

Home language:.....

Guardian/Parent: Mother ☐ Father ☐ Both mother and father ☐ Other..... (Tick)

Confidentiality/Anonymity Statement

I Mr Wilton Mudzokora declare that your privacy will be protected; the information that you will provide will only be used for research purposes. The information will be handled and reported in such a way that it cannot be associated with you personally. Your identity will not be known by anyone other than the researcher. All personal identifying information will be removed from written transcripts and any quotes used within the research report will be treated with confidentiality through the use of pseudonyms. The information that you provide will not be shared with your parents. All data will be kept securely and confidentially at my home. You are free to withdraw at any time without any penalties. In the case that you withdrew from participation arrangements will be made for the destruction of data in your presence.

Name of researcher: Mr Wilton Mudzokora

Signature:Date:.....

Individual interview questions

1. Tell me about your experience of falling pregnant as a teenager?
2. If you made a conscious decision to fall pregnant, please explain to me why that happened?
3. How did the world of being a teenager influence your sexual behaviour and your decisions around pregnancy?
4. Tell me about that time when you fell pregnant. How did your pregnancy influence your life as a teenager?
5. In your view, how did your pregnancy affect you and other people in your life?
6. Think of the time before your pregnancy. What were your thoughts about teenage pregnancy?
7. If you were to go back to that time before your pregnancy
 - Are there any things that you feel you could have done differently then?
9. What advice will you give to teenage girls about making/not making a decision to fall pregnant?
10. Are there any other things that you wish to add?

Appendix N: Ethical clearance



COLLEGE OF EDUCATION RESEARCH ETHICS REVIEW COMMITTEE

17 August 2016

Ref : **2016/08/17/46590633/18/MC**

Student : Mr W Mudzokora

Student Number : 46590633

Dear Mr Mudzokora

Decision: Ethics Approval

Researcher: Mr W Mudzokora

Tel: +2713 524 0377

Email: mudzokoraw@gmail.com

Supervisor: Prof. E Venter

College of Education

Department of Psychology of Education

Tel: +2712 429 4751

Email: ventee1@unisa.ac.za

Proposal: Female adolescents' experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga

Qualification: D Ed in Psychology of Education

Thank you for the application for research ethics clearance by the College of Education Research Ethics Review Committee for the above mentioned research. Final approval is granted for the duration of the research.

The application was reviewed in compliance with the Unisa Policy on Research Ethics by the College of Education Research Ethics Review Committee on 17 August 2016.

The proposed research may now commence with the proviso that:

- 1) The researcher/s will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.*
- 2) Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study, as well as changes in the methodology, should be communicated in writing to the College of Education Ethics Review Committee. An amended application could be requested if there are substantial changes from the existing proposal, especially if those changes affect any of the study-related risks for*

the research participants.

- 3) The researcher will ensure that the research project adheres to any applicable national legislation, professional codes of conduct, institutional guidelines and scientific standards relevant to the specific field of study.

Note:

The reference number **2016/08/17/46590633/18/MC** should be clearly indicated on all forms of communication [e.g. Webmail, E-mail messages, letters] with the intended research participants, as well as with the College of Education RERC.

Kind regards,



Dr M Claassens

CHAIRPERSON: CEDU RERC
mcdtc@netactive.co.za



Prof VI McKay
EXECUTIVE DEAN

Appendix O: Mpumalanga Department of Education letter



Building No. 6, Government Boulevard, Riverside Park, Mpumalanga Province
Private Bag X11341, Mbombela, 1200.
Tel: 013 753 5552/5115, Toll Free Line: 0800 233 116

Litiko le Tsenfundo, Umnyango we Fundo

Departement van Onderwys

Ndzwelo ya Dyondzo

Enquiries: JJ Mabena
Tel : 013 947 1710
Email : j.mabena@education.mpa.gov.za

Mr. Mudzokora W
P O Box 222
Dullstroom

Dear Mr. Mudzokora W

Re : APPLICATION TO CONDUCT A RESEACH ON PERCEPTION OF TEENAGE PREGNANCY IN BELFAST (MPUMALANGA) .

Your application to conduct a research titled "Female adolescent's experiences and perceptions of teenage pregnancy in Belfast.Mpumalanga" is hereby acknowledged.

Kindly be advised that the Department is not responsible for learners after school. Permission should be sought from the parents or guardians of the learners.

We regret to inform you that your application is not directed to the relevant authority.

Yours sincerely,

MR. JJ MABENA
DISTRICT DIRECTOR

2016-09-30
DATE



Appendix P: Example of response letters from principals and SGBs of the MP1, MP2 and MP3 secondary schools (Names of secondary schools withheld for confidentiality)

Date 16/10/2016

Siyifunile Secondary School

P O Box 222

Dullstroom

1110

Dear Mr Mudzokora W

Re: Application to conduct research at this school

Your application to conduct research title **“Female adolescents’ experiences and perceptions of teenage pregnancy in Belfast, Mpumalanga”** is hereby acknowledged.

Permission to carry out the research was granted on the understanding that the researcher would comply with the ethical measures stipulated in the application letter.

No adverse circumstances were reported during and after the interviews.

Yours Sincerely

.....

Signature Principal

.....

School Governing Board

Appendix Q: The Editor's Letter

Tel: 011 787 0797
hannant@mweb.co.za

Mrs G Hannant
28 Hillcrest Avenue
CRAIGHALL PARK
2196

5 October 2017

TO WHOM IT MAY CONCERN

I certify that I have edited the thesis

**FEMALE ADOLESCENTS' EXPERIENCES AND PERCEPTIONS OF TEENAGE
PREGNANCY IN BELFAST, MPUMALANGA**

by

WILTON MUDZOKORA

However, the correction of all errors/missing information remains the responsibility
of Mr Mudzokora.



G.C. HANNANT
BA HED